Contact Lens and Eyecare Symposium

January 22–26, 2003
Disney’s Coronado Springs Resort
Orlando, Florida
We’re Committed to Increasing Your Contact Lens Dispensing...and Growing Your Practice

From its inception, CLES has enjoyed the unwavering commitment of leading contact lens and lens care manufacturers in promoting and supporting the meeting to ensure its success. In addition, CLES has the support of leading professional organizations in developing world class continuing education.

CLES Education Partners

CLAO
Contact Lens Association of Ophthalmologists

CLES Platinum Sponsors

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David Fancher, CooperVision
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Edward Schilling, CLI

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John Chapman, Vistakon
Tina Schott, CLSA
Steve Wasserman, AOA
Edward Schilling, CLI
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Contact Lens and Eyecare Symposium
Welcome!

On behalf of the Contact Lens Institute (CLI), I’m delighted to welcome you to the inaugural meeting of the Contact Lens and Eyecare Symposium (CLES)!

CLES, which is more than two years in the making, was conceived out of a simple notion, that the contact lens industry deserves its own venue focused primarily on contact lenses, lens care and related eyecare issues. That vision has manifested itself in CLES and represents the first successful collaboration between ophthalmology, optometry and opticianry within the venue of a large symposium.

Achieving this collaboration would not have been possible without the dedication and commitment of our educational partners AOA, CLAO, and CLSA, their staffs and leadership.

We know that you have come here with one common purpose in mind: to obtain essential clinical information, research updates and practice management skills that will help you to grow your contact lens practice. We are confident that, over these five days at CLES, you will find that essential information in abundance.

Our focus at the CLI is to help to grow our industry—and the eyecare practitioner is the key catalyst in making that growth happen. We are delighted to be able to host a meeting with an outstanding program of continuing education: CE by and for leading eyecare practitioners.

We thank you for helping to make the inaugural meeting of CLES so successful! We also thank all CLES corporate sponsors, whose generosity and industry leadership have made CLES a reality. Working together, we can take a vital step forward in generating growth in the contact lens field.

“A Great Industry, A Great Meeting!”

On behalf of the Board of Directors of the Contact Lens Institute, it is a privilege and pleasure to welcome so many eyecare practitioners to CLES! Finally, a great industry has a great meeting to help us grow.

As manufacturers of contact lenses and lens care solutions, we CLI companies strive to bring you the latest technological advances to help you, the eyecare practitioner, to best serve your patients.

While technology drives growth, making that growth happen depends on education. We are proud to be able to offer more than 130 hours of continuing education courses at CLES, courses for all ophthalmic disciplines—and all available to you at no cost beyond your registration.

At CLES, you will see the cutting edge of contact lens technology. You also will obtain essential clinical skills from leaders in this industry. Today’s eyecare practitioner needs business skills, and practice management is a major part of our education offerings at CLES.

For creating such an outstanding CE track, we have our Education Partners to credit. Our thanks go out to CLAO, CLSA and AOA for putting together a comprehensive education program that truly achieves our goals in this inaugural meeting of CLES!

Steve Osbaldeston
Chair, Board of Directors
Contact Lens Institute
Full Page Vistakon Ad
**CLAO Symposia**

CLAO is offering 15 symposia at this year’s meeting, including three two-hour sessions that incorporate the CLAO named lectureships. These symposia with named lectures are scheduled as follows: Thursday, January 23rd, at 9:30am - 11:45am, “Dry Eye Symposium including the Harold A. Stein, MD, Lecture; Friday, January 24th, at 2:30pm - 4:45pm, “The Problem Contact Lens Patient Symposium” including the Oliver H. Dabezies, Jr., MD, Lecture; and Saturday, January 25th at 2:30pm - 4:45pm, “The Future of Refractive Surgery Symposium” including the Richard L. Lindstrom, MD, Lecture. For complete descriptions of all CLAO Symposia, see pages 41-45.

**CLAO Annual Business Meeting**

Be sure to attend the CLAO Annual Business Meeting scheduled for Thursday, January 23rd, at 11:45am in the Monterey 1 Room. The annual election of officers and board members will take place, along with awards ceremonies and general CLAO business.

**CLAO Foundation and International Attendee Reception**

This special social function is scheduled for Friday, January 24th, from 6:00pm to 7:30pm in Fiesta 1-4 Foyer and Patio Del Sol. It is open to all CLAO members, donors to the CLAO Foundation and any persons attending the meeting from outside the USA.

**Spouse/Guest Reception**

There will be a Spouse/Guest Reception on Thursday, January 23rd, at 9:30am to 10:30am in the Fiesta 7 Room. Information will be provided on exciting activities in and around Disney World.
Full Page AMO Ad
CLSA Fellow Examination

Achieving Fellow status in the Contact Lens Society of America is recognized as an industry standard of educational excellence. CLSA Fellow Members are considered among the finest contact lens professionals in the industry. All CLSA members are eligible for Fellow status. Becoming a Fellow is a three-step process, beginning with the written test. This test will be administered at CLES on Thursday, January 23, 2003.

Contact the CLSA office for more details on completion of the steps required to become a Fellow. Sign up today to sit for the written exam on the CLES registration form, and you will be well on your way to becoming a Fellow in CLSA.

Disney Behind the Scenes Tour – Gardens of the World

All CLES attendees are welcome to participate in the Gardens of the World private, behind-the-scenes tour, available only to meeting participants. Visit the registration booth to sign up for this event.

Friday, January 24, 2003
2:00pm – 5:00pm $69

Disney Behind the Scenes Tour – Inspiration through Walt’s Eyes

All CLES attendees are welcome to participate in the Inspiration through Walt’s Eyes private, behind-the-scenes tour, available only to meeting participants. Visit the registration booth to sign up for this event.

Friday, January 24, 2003
2:00pm – 5:00pm $89

CLSA Golf Tournament

All CLES attendees are welcome to participate in the annual CLSA golf tournament, at Disney’s Lake Buena Vista Golf Course. Visit the registration booth to see if space is available for this event. (Note: Entry deadline was January 6, 2003.)

The 2003 CLSA Golf Tournament is sponsored by Paragon Vision Sciences.

Friday, January 24, 2003
11:30am - 6:30pm
Entry Fee: $85

It’s easy to reach CLSA for more detailed information on CLSA programs. Call (800) 296-9776 or (888) 296-8462 in Canada, or visit us on the Internet at www.clsa.info.
The American Optometric Association is proud to be an Education Partner of the Contact Lens and Eyecare Symposium (CLES). We are delighted to be part of such an important gathering of the ophthalmic professions—all dedicated to furthering our collective understanding of clinical issues related to contact lenses.

Professional continuing education serves the ultimate aim of better serving our patients and growing our practices. We are pleased that the AOA has been asked to help develop accredited optometric courses. We believe that the CLES Education Task Force as a whole has done an admirable job of addressing many of the issues that eyecare professionals from all disciplines face everyday in their practices.

CLES attendees are able to enjoy courses from their prospective professions or take courses developed by all professions. At AOA, we think this is a strength of the concept of CLES, and we are pleased to be able to contribute our unique perspective and vast clinical experience in prescribing contact lenses and in managing patients and complications.

We call your attention to the AOA-developed courses (listed in gold), and also to the General Sessions that we have helped to develop. These General Sessions address topical issues—silicone hydrogel and GP continuous wear lenses, kids and contact lenses, corneal reshaping with GP lenses—that provide both challenges and practice building opportunities.

Finally, we are also pleased to be able to offer three essential courses that are required for all optometrists in the state of Florida, but which could benefit all eyecare professionals. These include Jurisprudence for the Optometric Practice, HIV/AIDS, and Medical Errors. These courses are offered Sunday morning.

Congratulations to CLES on its inaugural meeting! We are pleased to be part of CLES as we embrace “Education, Technology and Practice Growth.”

P. Douglas Becherer, OD, FAAO
CLES Chairman of Education for American Optometric Association
Contact Lens and Cornea Section
### Wednesday January 22nd, 2003

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January 22, 2003

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<td>CLSA Board Meeting</td>
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### Continuing Education Credits

- CLAO is accredited by the Accreditation Council on Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. All CLAO education is approved by NCLE and JCAHPO. Additionally, some CLAO education is approved by the Council on Optometric Practitioner Education (COPE).
- All AOA education is approved by the Council on Optometric Practitioner Education (COPE).
- All CLSA education is approved by the National Contact Lens Examiners (NCLE) and the Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO). Additionally, some CLSA education is approved by the Council on Optometric Practitioner Education (COPE).

A complete list of accredited courses may be obtained at the CLES Registration Desk.

### Accreditation Key

- ACCME: Accreditation Council on Continuing Medical Education
- COPE: Council on Optometric Practitioner Education
- JCAHPO: Joint Commission on Allied Health Personnel in Ophthalmology
- NCLE: National Contact Lens Examiners

### Course Key

- CLAO Educational Program
- AOA Educational Program
- CLSA Educational Program

### Course Descriptions

#### 22-101A LEVEL I: How to Be a Better Contact Lens Technician, Part I  
**Phyllis L. Rakow, FCLSA, COMT, NCLC-AC**  
Yucatan 3  
This course details the many aspects necessary to provide maximum assistance to the ophthalmologist, from the patient’s initial contact lens fitting through follow-up visits. Topics include maximizing chair time, scheduling, taking a contact lens history, handling emergencies, developing recall programs, and other practice-building ideas. Keys to building a contact lens patient base are also discussed.

#### 22-102A LEVEL II: Retinoscopy, Part I  
(limit to 20 attendees)  
**Bernard V. Stewart, FCLSA, MA**  
Yucatan 2  
This course presents techniques and methods of retinoscopy and the various ways in which it is performed. This course concentrates exclusively on retinoscopy, starting with the most basic approach and proceeding to more advanced techniques of retinoscopic refinement. By the completion of the course, the participant will have been exposed to retinoscopy.

#### 22-201A LEVEL I: How to Be a Better Contact Lens Technician, Part II  
**Phyllis L. Rakow, FCLSA, COMT, NCLC-AC**  
Yucatan 2  
This course details the many aspects necessary to provide maximum assistance to the ophthalmologist, from the patient’s initial contact lens fitting through follow-up visits. Topics include maximizing chair time, scheduling, taking a contact lens history, handling emergencies, developing recall programs, and other practice-building ideas. Keys to building a contact lens patient base are also discussed.

#### 22-202B LEVEL II: Retinoscopy, Part II  
(limit to 20 attendees)  
**Bernard V. Stewart, FCLSA, MA**  
Yucatan 2  
This course presents techniques and methods of retinoscopy and the various ways in which it is performed. This course concentrates exclusively on retinoscopy, starting with the most basic approach and proceeding to more advanced techniques of retinoscopic refinement. By the completion of the course, the participant will have been exposed to retinoscopy.

#### 22-301 Level II: Cosmetic & Prosthetic Contact Lenses  
**Buddy Russell, FCLSA; R. Lee Hewitt, FCLSA**  
Yucatan 1  
This course looks at various options the contact lens practitioner may utilize to manage patients who desire a change in iris color or wish to occlude a corneal scar. Case histories and outcomes are presented.

#### 22-302 LEVEL II: The Issue of Non-Compliance  
**Diane F. Drake, FCLSA, NCLC-AC, ABOM**  
Yucatan 2  
As contact lenses become more readily available, some consumers are less conscious of the need to comply with the instructions of their eyecare providers. It is the responsibility of contact lens professionals to properly inform their patients of the consequences of non-compliance. This course lists common issues of non-compliance, as well as not-so-common issues and how we as contact lens professionals may encourage better compliance by our contact lens patients.

#### 22-401 LEVEL II: Factors Affecting Contact Lens Wear  
**Buddy Russell, FCLSA**  
Yucatan 1  
This course covers tear film, keratoconjunctivitis sicca, systemic diseases, pathology, environmental factors, contact lens induced pathology, and medications affecting contact lens wear. Participants will be able to identify the various systemic disorders and their potential impact on contact lens wear, recognize lid and corneal pathology, and conduct proper decision making concerning contact lens complications.

#### 22-402 LEVEL II: Practice Management: Marketing & Promotion  
**Diane Broe, FCLSA**  
Yucatan 2  
This course is designed to give the contact lens practitioner the basic tools to run an efficient, successful practice. Included are tips on marketing and promotion that allow a contact lens practitioner to attain its potential, as well as information on staffing, retention (of staff and patients) and customer service.
9:30am – 10:30am

CLS Leadership Program
Level I - Inside the CLSA
Tina M. Schott, Executive Director
Contact Lens Society of America

Yucatan 3
Join the officers, board and staff of the Contact Lens Society of America in an exploration of the CLSA. What is the CLSA? How was it started? What does the CLSA do, what is its niche in the ophthalmic industry, and who makes up the membership and constituency of the CLSA? Want to get more involved in the CLSA? Find out what you can do to help advance the contact lens industry.

7:00am – 7:00pm
CLS Registration
South Registration

7:30am – 8:00am
Continental Breakfast
Sponsored by Vistakon
Coronado Foyer

8:00am – 9:15am

CLES Keynote Address
01-23: Who Moved My Patient?
Jones Loflin
Coronado L
This CLES highlight, which is open to all attendees, will prepare participants to grasp excellence—in their eyecare practices and in their lives—by imparting skills in how to effectively deal with change. Who Moved My Patient? is presented by Jones Loflin, a nationally recognized business consultant who is licensed to provide training on the best-selling book, Who Moved My Cheese? In this inspiring program, Loflin stresses how to live a life of excellence instead of mediocrity. He employs humor, powerful examples and frequent audience interaction. His seminars and training are best described as entertaining, engaging and practical.

7:00 – 7:15am
Continental Breakfast

7:30 – 8:00am
CLES Registration

8:00 – 9:15am

Who Moved My Patient?

JONES LOFLIN
Nationally recognized business consultant and licensed speaker on Who Moved My Cheese?

“Who Moved My Cheese?”

This humorous and thought-provoking collection of ideas highlights ways of getting more out of life. Loflin is President of H.O.P.E. Inc., a business meeting the training and development needs of individuals and organizations.

8:30 – 9:30am

Who Moved My Patient?

JONES LOFLIN
Nationally recognized business consultant and licensed speaker on Who Moved My Cheese?

“We should all be passionate about certain things in life, including our family, spiritual beliefs, career and relationships.”

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3:30pm – 5:30pm

23-102A LEVEL III: Toric Soft & Rigid Contact Lens Fitting, 1st Hour
Peter Rasul, MD, PhD
Coronado F, G
Contact lens fitters should fit all types of soft and rigid contact lenses. Patients with moderate astigmatism usually require soft toric or spherical RGP lens fitting. However, sometimes these lenses do not correct a patient’s astigmatism correctly. Toric rigid lens fitting can be required for large corneal astigmatism and/or residual astigmatism. This course teaches fitting methods for RGP lenses, including bitoric lenses, front and back toric lenses, prism ballasted bitoric lenses, as well as for soft toric contact lenses.

23-103A LEVEL II: Financial Decision Making in the Eye Care Practice, 1st Hour
George Stern, MD, MBA; Michael Brown
Coronado B
Accounting data can be used not only to “keep score” of a practice’s earnings and holdings, but also to assess the financial status of a practice in order to make intelligent financial business decisions. The two instructors in this course cover: accounting basics, ratio analysis, benchmarking, accounts receivable management, overhead/expense management, cost analysis relative to contracting, and capital budgeting.

23-105 LEVEL I: Increasing the Optical Dispensary Capture Rate
Arthur DeGenaro, Opt; Joseph L. Bacetti, MD
Coronado D
Ophthalmologists examine many patients each day and provide a new or updated eyeglass prescription. This symposium focuses on why patients decide to not have their prescriptions filled by the office of their examining doctor. We also examine what professional steps can be taken to better serve the needs of patients.

23-106 LEVEL II: Management of the Atypical Cornea with Contact Lenses
Patrick Caroline, FCLSA, FAAO; Kenneth Lebow, OD
Coronado P, Q
This course presents individual case histories describing a wide variety of contact lens designs and fitting techniques for the atypical eye. Special emphasis is placed on the role of corneal topography as an aid in selecting the most appropriate lens design for the individual patient. Cases discussed include contact lenses following corneal trauma, post-keratoplasty, refractive surgery, keratectomy and others.

23-107 LEVEL II: Dry Eye Symposium
including The Harold A. Stein, MD, Lectureship by Frank Holly, PhD, 1st hour
David Lamberts, MD; Gary Foulks, MD; Frank Holly, PhD; H. Dwight Cavanagh, MD, PhD; Greg Gemoets, OD
Monterrey 1
This symposium offers an in-depth look at the dry eye. It covers the historical background on this topic along with the most up-to-date theories and available treatments. This symposium includes the Harold A. Stein, MD, Lecture. This special presentation covers what is presently known about the pre-ocular tear film and its critical importance in the successful wear of contact lenses and eye health in general.

Contact Lens and Eyecare Symposium
Thursday, January 23, 2003

8:00 am – 9:15 am

Who Moved My Patient?

JONES LOFLIN
Nationally recognized business consultant and licensed speaker on Who Moved My Cheese?

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In this inspiring program, Loflin stresses how to live a life of excellence instead of mediocrity. He employs humor, powerful examples and frequent audience interaction. His seminars and training are best described as entertaining, engaging and practical.

Loflin is the author of Prime Rib or Potted Meat? This humorous and thought-provoking collection of ideas highlights ways of getting more out of life. Loflin is President of H.O.P.E. Inc., a business meeting the training and development needs of individuals and organizations.
Contact lens fitters operate in the unique environment of providing professional services, while retailing therapeutic devices that are largely regarded by the public as consumer items. This creates the challenge to ensure that patients receive the highest degree of contact lens care, while maintaining a profitable position for the practice.

This session covers the trials and tribulations of the fitter in the trenches who must cope with the wants and needs of the contact lens patient. Patients are inundated with misinformation, myths and ignorance of the importance of the contact lens as a medical device. The scenario has been experienced first-hand by all clinicians.

Also discussed are the psychology of the keratoconus patient, the application of new technology and lens designs, and specialized fitting techniques. By selling yourself through knowledge, you will become the strongest link to your patient, to your commitment to eye health, and to contact lenses achieving their greatest potential for success.
and what to do when microbial keratitis occurs.

23-205 Level II: Introduction to Corneoscleral Contact Lens Fitting
Christina Sindi, OD
Coronado C
This course explains the mechanics and fitting techniques of corneoscleral contact lenses. Participants learn to fit, adjust and modify corneoscleral lenses, while avoiding common pitfalls. Various design options are discussed, including spherical, toric, reverse geometry keratoconus and ortho-k.

23-206 LEVEL I: Computerizing the Optical Dispensary
Arthur DeGennaro, Opt; Joseph L. Bacotti, MD
Coronado D
When building an optical dispensary, you are building a retail business. This requires certain skill sets and a degree of expertise and experience. As with any other contemplated business venture, you should create a strategic plan before hand. A well-constructed and executed strategic plan will aid in the decision making process, help avoid costly, if not catastrophic, errors and save time and money in the long run.

23-207 level III: The High DK Silicone Contact Lenses for Extended Wear & Daily Wear
Peter Donshik, MD
Coronado R, S
This course describes the new high Dk silicone lenses and the unique advantages for daily and extended wear. The course also discusses problems associated with extended wear and how the new Dk silicone lenses addresses these problems. Also discussed is the potential of the high Dk silicone contact lens to be an alternative to laser vision correction.

23-208 Level II: No Nonsense Management of Presbyopia
Kenneth Lebow, OD; Patrick Caroline, FCLSA, FAAO
Coronado P, Q
The modern contact lens wearing population is rapidly maturing, and the contact lens practitioner is faced each day with the problem of fitting the presbyopic patient. In the United States there are 30 contact lens designs for correction of presbyopia. Yet, only a few provide reasonable distance and near images. Participants in this course are exposed to a detailed assessment of the optical and neurological benefits of certain bifocal designs. This information allows the practitioner to better evaluate all lenses for the presbyopic patient.

23-209: Plugs, Drugs & Killing Bugs
Barry Eiden, OD, FAAO
Coronado M, N
Keeping a patient in contact lenses sometimes requires first improving the ocular environment. This course discusses what to do for conditions like chronic blepharitis, GPC, dry eyes, and what to do when microbial keratitis occurs.

23-210: Avoiding Microbial Keratitis & Adverse Events
Brien Holden, PhD, FAAO
Monterrey 2, 3
Microbial keratitis and other adverse events are reviewed along with the incidence in both the contact lens and non-contact lens populations. Understanding the change in the risk when altering the contact lens environment is the first step in designing systems that reduce patient problems.

11:30am – 1:00pm

Is There a GP Lens Renaissance in Sight?
Ed Bennett, OD
Firsta S
CLSA members only
Sponsored by CooperVision

11:45am – 12:30pm

CLAO Annual Election/Business Meeting
All CLAO members are encouraged to attend
Monterrey 1

11:45am – 1:00pm

Lunch
Complimentary tickets for lunch distributed with badges

Coronado K

1:00pm – 2:00pm

23-301A LEVEL I: Getting Started in Optical Dispensing Symposium, 1st Hour
Moderator: Joseph L. Bacotti, MD;
Speakers: George Stern, MD, MBA; Arthur DeGennaro, Opt; Raymond Dennis, MA
Coronado P, Q
This course presents discussions of key issues in optical dispensing. Should I start dispensing? How do I plan the optical dispensary space? What about capital budgeting? Will this really be a profit center? How do I begin planning a frame inventory? What is the best process for choosing and working with a lab?

23-302 Level II: Contact Lenses and the Corneal Surgery Patient Symposium
Moderator: Bruce Koffler, MD;
Speakers: Patrick Caroline, FCLSA, FAAO; Richard Shugarman; Michael A. Ward, MMSc; FCLSA, FAAO; Gary Foulks, MD
Coronado F, G
This symposium examines the following issues: fitting approaches to the abnormal cornea, cosmetic contact lenses after corneal trauma, and fitting the post-corneal transplant patient. Also examined are fitting the post-refractive surgery patient and therapeutic lens use following corneal surgery. Audience Q&A follows.

23-303 Level I: SOBLEC Symposium
Cesar Lipener, MD; Paulo Ricardo de Oliveira, MD; Orestes Miraflia, MD; Adamo Lui Netto, MD
Coronado C
The Brazilian Ophthalmological Society of Contact Lenses and Cornea (SOBLEC) was invited to put on this special International Symposium. Well-known ophthalmologists from Brazil present various scientific papers. Topics include complications of extended wear lenses, contact lens fitting after penetrating keratoplasty, hybrid contact lenses, and ocular surface disorders.

23-304A Level III: Medical & Surgical Management of Infectious Keratitis, 1st Hour
David Meisler, MD; Lee Stock, MD
Monterrey 1
The first part of this course covers current medical therapy for infective keratitis, including treatments for bacterial, fungal, and acanthamoeba. Discussion is directed toward optimum choice for antimicrobial therapy for each of the above. The second part of the course concentrates on surgical management of infective keratitis, including discussions on the best way to procure material for diagnosis (i.e., swab, scraping, biopsy). Discussion further elucidates other surgical treatments for corneal infection, including lamellar keratectomy, penetrating keratoplasty, conjunctival flap, cryotherapy and enucleating.

23-305: Soft Bifocals: What’s New & What’s Working?
P. Douglas Becherer, OD, FAAO
Monterrey 2, 3
New and improved soft bifocals have been touted since their introduction in the mid ’80s. Finally, soft bifocal lenses with reasonable success rates are making patients happy and enthused, resulting in referrals of their “Boomer” friends. Tweaking the lens design can make the difference between failure or success. Pearls leading to success with the more popular designs are presented.

23-306: Colored Contacts for Fun & Function
Mitchell Cassell, OD
Coronado M, N
Changing brown eyes to blue can be exciting, but even more rewarding is taking the cosmetically challenged eye and creating a natural look. Wild looking lenses can add fun to certain functions, but misuse can cause permanent problems. Colored contact lenses can provide both fun and function.
23-307 LEVEL I: Designing an Ergonomically Effective Office  
Diane Bree, FCLSA  
Coronado B  
This course outlines ways that you can set up a contact lens practice that will not cause you physical problems in the future. All of us, as contact lens fitters, find ourselves bending, stooping and staring to get the best look we can through the equipment we use. We go over set-ups that are both wrong and right, and show ways to improve the environment you work in every day.

23-308 LEVEL II: Aak! All About Kids  
Vicky Sheppard, FCLSA; Buddy Russell, FCLSA  
Yuratan 2  
Many children require contact lenses to maximize visual potential. Whether the indication for contact lenses is congenital or acquired, these patients require time and patience on the part of the practitioner. This course presents case histories demonstrating some of the various indications a child might exhibit for contact lenses.

23-309 LEVEL III Fellow Prep: Topographical Interpretations & Considerations  
John A. Mountford, OD  
Coronado B  
The correct interpretation of topography data enables the practitioner to fully appreciate the subtle variations in corneal shape. This information can then be applied to the fitting of GP lenses for keratoconus, post PK and refractive surgery and orthokeratology situations. This course covers basic types of corneal topography systems, principles and significance of the various map functions and associated contact lens applications. Particular emphasis is placed on nonstandard lens fitting such as keratoconus, post PK and refractive surgery and orthokeratology.

23-310 LEVEL II: Post Refractive Surgical Fitting  
Renee Solomon, MD; Benny W. Phillips, Jr., FCLSA  
Coronado D  
Not every refractive surgery yields perfect results. This course covers the history and gives an overall view of refractive surgery. The types of refractive surgery from radial keratotomy to laser assisted in situ keratomileusis are discussed. This lecture covers contact lens fittings of the post-surgery patients and special designs that can be of assistance, when fitting these surgically altered corneas.

23-311 LEVEL II: Orthokeratology Options in 2003 & Beyond  
Craig W. Norman, OD, FCLSA; Alexander Cannella, FCLSA, RN  
Coronado R, S  
The past several years have seen major breakthroughs in the science of orthokeratology. Designed to decrease myopia by reshaping the cornea, today’s orthokeratology is very sophisticated, incorporating corneal topography analysis combined with software calculation programs to achieve desired results. This course discusses new orthokeratology lens designs, previous methods of corneal reshaping, today’s accelerated techniques and the fitting process.

2:15pm – 3:15pm  
23-401B LEVEL I: Getting Started in Optical Dispensing Symposium, 2nd Hour  
Moderator: Joseph Baccotti, MD  
Speakers: George Stern, MD, MBA; Arthur DeGennaro, Opt; Raymond Dennis, MA  
Coronado P, Q  
This symposium examines key issues of optical dispensing: choosing and working with a lab, staffing your dispensary: what to look for in opticians, and working with vendors. Also examined is the issue: Does quality limit profit? Audience Q&A follows.

23-402 LEVEL II: Therapeutic Contact Lenses Symposium  
Moderator: William Ehlers, MD  
Speakers: Gary Foulks, MD; Peter Donshik, MD; Jeanine Suchecki, MD  
Coronado F, G  
Therapeutic contact lenses and their various uses in treating ocular conditions are discussed in this symposium. Therapeutic contact lenses for corneal and conjunctival disease and for ocular trauma are covered along with complications from the use of therapeutic lenses and the management of patients in such cases.

23-403 LEVEL II: The Best of CLAO Research Symposium – Anterior Segment  
Moderator: Peter Kastl, PhD, MD  
Speakers: Penny Asbell, MD; Heather Maust, MD; Shaun Haji, MD; Satya Reddy, MD; Renee Solomon, MD  
Coronado R, S  
This symposium examines a host of research-oriented issues, among them: MRSA infections keratitis following refractive surgery; US multicenter trial on conductive keratoplasty for corneal spherical hyperopia: recent results of two-year follow-up; and atypical peripheral sub-epithelial scarring, with audience Q&A. In addition: summary of US results of the treatment of presbyopia with conductive keratoplasty; reproducibility and agreement of caliper, ultrasound, and Orbscan; and measurement of anterior chamber width. Audience Q&A follows on each subject.

23-404B LEVEL III: Medical & Surgical Management of Infectious Keratitis, 2nd Hour  
David Metzler, MD; Lee Stock, MD  
Monterrey 1  
The first part of this course covers current medical therapy for infective keratitis, including treatments for bacterial, fungal and acanthamoeba. Discussion is directed toward optimum choice for antimicrobial therapy for each of the above. The second part of the course concentrates on surgical management of infective keratitis, including discussion on the best way to procure material for diagnosis (i.e., swab, scraping, biopsy). Discussion further elucidates other surgical treatments for corneal infection, including lamellar keratotomy, penetrating keratoplasty, conjunctival flap, cryotherapy and enucleating.

23-405 RGP Bifocals: Pinpointing Reasons for Success  
Rob Davis, OD, FAAO  
Monterrey 2, 3  
RGP bifocals work, and they offer vision comparable and even better at times than spectacles. Limitless in power and design, RGP bifocals can transform your bifocal patients into your most enthusiastic patients. This course walks you through formulas for successfully prescribing different types of RGP bifocals.

23-406: Competing for the Contact Lens Patient  
Barry Eiden, OD, FAAO  
Coronado M, N  
The key to a successful contact lens practice in these times of managed care and alternative delivery sources is to create a contact lens specialty practice. This course presents key elements in establishing a contact lens specialty environment. Included are staff and patient education, office environment, inventory management and economic issues.

23-407 LEVEL II: A Primer in Corneal Refractive Therapy [CRT™]  
Timothy C. Koch, FCLSA; James W. Slightom, FCLSA, ABOM, NCLC  
Coronado B  
This course introduces concepts of CRT. Included are a description of the lens from a design standpoint, as well the clinical science behind lens design. Processes involved in fitting also are covered.

23-408 LEVEL II: Improving Compliance By Teaching Contact Lens Patients Like Adults  
William B. Underwood, FCLSA  
Coronado E  
Studies indicate that approximately 75 percent of contact lens wearers are non-compliant with at least one aspect of lens care. To help combat this phenomenon, this course presents ways to apply the principles of adult education to contact lens patient instruction. Differences in learning styles are discussed. New technologies and environmental changes which facilitate improved compliance also are identified.
This symposium examines the interaction of these remarkable new lenses with the ocular surface and documents their clinical performance for clinical practitioners.

**Session topics & presenters:**
- High Dk Soft Lenses
  - Brian Holden, PhD, FAAO
- **Bacterial Binding to High Dk Materials**
  - H. Dwight Cavanagh, MD, PhD
- **Clinical Findings with Silicone Hydrogels**
  - Debbie Sweeney, PhD
- **Clinical Experience with PureVision**
  - Fred Edmunds, OD
- **Clinical Experience with Night & Day**
  - Rick Weisbarth, OD
- **Clinical Experience with Menicon Z**
  - Joe Barr, OD, MS
- **Future of Continuous Wear**
  - Peter Bergenske, OD

**5:30pm – 7:30pm**
**Exhibit Hall Grand Opening & Reception**
Coronado H, J

**7:30pm – 9:30pm**
**CLAO Education and Research Foundation Board of Trustees Meeting**
Baja

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**FRIDAY January 24, 2003**

**7:00am – 5:00pm**
**CLAES Registration**
South Registration

**7:15am – 7:45am**
**Continental Breakfast**
Sponsored by Vistakon
Coronado Foyer

**7:45am – 8:45am**
**24-101 LEVEL II: ECLSO/ H. Jonathan Kersley, MD, Symposium**
Jane Sparholt, MD, moderator; Torben Møller-Federsen, MD, PhD; Gudrun Bischoff, MD; René Mely, MD
Coronado F, G

The European Contact Lens Society of Ophthalmologists (ECLSO) was invited to put on this special International Symposium. Four well-known ophthalmologists from Europe present papers on the therapeutic use of silicone hydrogel contact lenses and present data on cellular changes after contact lens wear utilizing confocal microscopy.

**24-102A LEVEL II: Getting Compliant with HIPAA, 1st Hour**
Sue Vichrilli, COT
Fiesta 6

Feeling overwhelmed by HIPAA implementation? This course is designed to provide step-by-step practical HIPAA application as the regulations affect staff, business associates, and patients and claims transmission. Participants will learn to describe HIPAA implementation as it affects staff, patients and claims submission, and identify key components in establishing and/or maintaining HIPAA protocol. Forms to assure compliance are provided.
24-103 Level II: Management of the Post-Refractive Surgery Patient: Medical, Surgical and Contact Lens Modalities
William Lahners, MD
Monterrey 1
This course covers the modern care of the post-operative refractive surgical patient with special emphasis on current techniques. Specific areas addressed include patient selection, realistic expectation, routine post-operative findings, common post-operative problems, uncommon post-operative problems and the use of contact lenses as a therapeutic modality.

24-104: Diagnostic Equipment You Need
Rob Davis, OD, FAAO
Coronado M, N
These are not the keratometers or slit lamps of the previous generations. Today’s computer driven equipment can examine the cells of eye and predict success with contact lenses and refractive surgery. Does it make our job easier or more complicated? Can the cost be justified? This course examines what new instrumenta-

cion can do for a practice and whether the cost can be justified.

24-105: The Lid Machine & Soft Toric Lens Orientation
Graeme Young, M.Opt.
Monterrey 2, 3
Stable predictable orientation is key to successful toric lens fitting. Recent research into toric soft lens orientation is reviewed to provide a better understanding of the factors governing toric lens fit. High speed video recordings show some of the complex interactions between lids and lens. The increasing use of disposable toric soft lenses has led to a reappraisal of aspheric correction. The presentation reviews simplified fitting techniques appropriate for today’s soft toric lenses.

24-106 LEVEL III Fellow Prep: Fitting After Corneal Trauma
John A. Mountford, OD
Coronado E
Post-traumatic contact lens fitting can restore functional vision and/or ocular protection to the cornea following trauma. The trauma can be due to disease, accident or surgery. This course discusses the types of contact lens applications that can be used for conditions such as Bells Palsy and other ocular surface exposure conditions, cicatrical pemphigoid, aniridia, corneal scaring, post graft and refractive surgery. Particular attention is paid to the advantages of GP scleral lenses, prosthetic sclerals, reverse geometry lens variations and silicone hydrogels.

24-107 LEVEL I: Soft Contact Lenses & Solutions Update
Michael A. Ward, MMSc, FCLSA, FAAO
Coronado C
In this course, a rotating panel of Fellows of the Contact Lens Society of America is challenged by the facilitator to solve real patient cases in a round table format. View first hand the analytical talents of the most experienced and advanced contact lens specialists in the world, as they solve in-depth and difficult cases. Fitters of all levels are invited to participate or just observe experts discuss challenging contact lens cases.

24-108 LEVEL I: Toric Soft Contact Lenses
Jane Buckland, FCLSA, FNAO, NCLC-AC; Mark P. Andre, FCLSA, FAAO
Coronado D
This course is designed to familiarize the participant with the most up-to-date procedures for fitting, designing, application and problem solving of toric soft lenses. At the conclusion of the course, the participant will be able to understand and apply fitting and design techniques that will enable the participant to achieve greater success in fitting soft toric lenses.

24-109 LEVEL II: Fitting the Presbyope
Michael S. Gzik, FCLSA
Coronado P, Q
This course discusses methods of selecting a proper presbyopic candidate for RGP lens fitting. Materials and designs of simultaneous and translating lenses are presented. Patient management, follow-up procedures and instructions also are discussed. Participants learn to differentiate the methods of correcting presbyopia to meet these needs. The methods include but are not limited to glasses, distance contacts and glasses, bifocal lenses and monovision.

24-110 LEVEL III: Fitting Large Diameter GP Lenses
Al Vaske, BA, NCLC
Coronado B
This course begins with a short history of where contact lens fitters have been, followed by the philosophy of larger diameter lenses, anatomy of a large diameter GP lens and case histories. Presentations include post graft patients, post refractive surgery patients, globus keratocos patients, and pellucid marginal degeneration patients.

7:00am – 12:00noon
CLSA Fellow Practical Exam
Fiesta 7

8:00am – 12:15pm
24-801 CLAO/JCAHPO Program: Tech I Basic/Intermediate
Yucatan 2

8:00am – 9:00am
History Taking
Diana Coffman, CO, COMT

This course teaches participants how to obtain an accurate and concise history. Discussed here: chief complaint, history of present illness, past ocular history, ocular and systemic medications, past medical history, family history, allergies and general information.
9:00am – 10:00am
**AIDS and the Ophthalmic Practice**

Charles Slonim, MD, FACS

This course presents an overview of AIDS and the relationship of this disease with the ophthalmic practice. There is a special emphasis on office precautions in the contact lens practice. Detailed discussion of the pathobiology, epidemiology, and the associated ocular manifestations of AIDS are included. The risks of AIDS transmission between allied health personnel and patients are also be discussed.

10:15am – 11:15am
**The Red Eye**

Peter Donshik, MD

This course reviews the causes and manifestations of the different diseases resulting in the red eye. Differential diagnosis, diagnostic tests and treatment options are presented.

11:15am – 12:15pm
**Basic Surgical Assisting**

Diana Hatsis, RN, BScN, COT

This course covers basic information on universal precautions, aseptic technique, and gowning and gloving procedures. Included is information on basic techniques in surgical assisting, care and handling of microsurgical instruments and sterilization procedures. Also covered are basic patient care issues in the surgical setting, including patient preparation, informed consent and postoperative instructions.

8:45am – 9:45am
**24-102B Level II: Getting Compliant with HIPAA, 2nd Hour**

Sue Vichrilli, COT

**Fiesta 6**

Feeling overwhelmed by HIPAA implementation? This course is designed to provide step-by-step practical HIPAA application as the regulations affect staff, business associates, and patients and claims transmission. Participants will learn to describe HIPAA implementation as it affects staff, patients and claims submission, and identify key components in establishing and/or maintaining HIPAA protocol. Forms to assure compliance are provided.

9:00am – 11:00am
**01-24 LEVEL II:CLES General Session – Kids, Contacts & Corneal Modifications**

Keith W. Harrison, FCLSA; Craig W. Norman, CO, FCLSA; Ed Bennett, OD; FAACS; John Mounford, OD; K. McCarthy, OD

**Coronado L**

This two-hour symposium is a lively interaction between an international panel of experts and the audience, who will glean insights on growing the eyecare practice. We will examine fitting techniques and also discuss ways to market our products and skills to this interesting and challenging group of young consumers.

Among topics discussed:

- Passive and accelerated corneal refractive modification in the adult, teen and preteen population. What is the potential for myopia control?
- Effective ways to employ single use and/or extended wear contact lenses for kids.
- Meeting demand for color enhancement tints.

This CLES General Session offers timely and practical applications to help participants to achieve real practice growth by appealing to young patients with the latest in lens systems.

11:30am – 12:15pm
**Exhibit Hall Open with Lunch**

Coronado H, J

11:30am – 5:00pm
**CLSA Golf Tournament**

See page 6 for details

1:00pm – 4:45pm
**24-902 CLAO/JCAHPO Program: Tech I**

**Basic/Intermediate**

**Yucatan 2**

1:00pm – 1:45pm
**Ocular Trauma**

Bill Ehlers MD

This course presents an overview of ocular trauma with epidemiological data and guidelines for triage. Case presentations including presentation and management are highlighted.

1:45pm – 2:45pm
**Ancillary Testing**

Diana Shamis, CO, COMT

This program addresses the ancillary tests and measurements available to the ophthalmic staff to assist in evaluating various conditions. Presented along with the indications for each are: A & B scans, exophthalmometry, Amsler grid, Schirmer tests, pupillary evaluation and estimation of anterior chamber depth.

3:00pm – 4:00pm
**Refractometry 101**

Lisa Praine, CO, COMT

This course covers the basics of refractometry, including a discussion of basic optics, types of refractive errors and lenses necessary to correct them. Determination of a starting point and various refinement techniques including fogging, astigmatic dials and the duochrome test are included. Also presented is a discussion of accommodative reserve and presbyopic prescriptions.

4:00pm – 4:45pm
**Strabismus: Diagnosis, Classification and Treatment**

Mary O’Hara, MD

This presentation discusses the types of strabismus and their classification, as well as simple office techniques for screening and diagnosis of strabismus. The use of the corneal light reflex, Bruckner red reflex and cover testing are discussed and illustrated. Details concerning the clinical characteristics, diagnosis and treatment of the most common forms of strabismus (esotropia, exotropia, hypertropia, cranial nerve palsies, etc.) and major surgical and non-surgical treatment modalities are also presented.

2:00pm – 5:00pm
**CLSA Tours**

See page 6 for details

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**FRIDAY CLAO SYMPOSIUM**

**2:30pm – 3:30pm**

First hour

**The Problem Contact Lens Patient Symposium**

Including the Oliver H. Dabazies, Jr., MD, Lectureship

**Coronado F, G**

**Named Lecturer**

**JAMES E. KEY, II, MD**

Professor of Ophthalmology

University of Houston

Panelists: William Driebe, MD; Peter Donshik, MD; Gary Foulks, MD; Bruce Koffler, MD; Zoraida Fiol-Silva, MD

This two-hour symposium examines a host of issues related to solving contact lens related clinical problems. Among them:

- Lens related keratitis: diagnosis and management
- Managing the allergic contact lens patient
- Dry eyes and blepharitis
- How to make contact lenses work.

**The Oliver H. Dabazies, Jr., MD, Lecture**

Meeting the Challenge of Presbyopia with Contact Lenses
2:30pm – 3:30pm

24-201A LEVEL II: The Problem Contact Lens Patient Symposium including The Oliver H. Dabezies, Jr., MD, Lectureship by James E. Key II, MD 1st Hour
William Driebe, MD; Peter Donshik, MD; Gary Foulks, MD; Bruce Koffler, MD; James E. Key, II, MD; Zoraida Fiol-Silva, MD
Coronado F, G
This symposium examines the following issues: contact lens related keratitis; diagnosis and management, managing the allergic contact lens patient; dry eyes and blepharitis: how to make contact lenses work. Also, the Oliver Dabezies Lecture explores: Meeting the challenge of presbyopia with contact lenses.

24-202 LEVEL II: Ray Tracing & Refractive Surgery
Richard Efferman, MD
Coronado B
This course acquaints the practitioner with the fundamentals of ray tracing and refractive surgery. The Tracey Tech system does not use a Hartman-Shack array but rather a series of sequential laser spots centered on the retina. The position of these spots is calculated, expressed as Zernike polynomials and displayed as high and low order aberrations. The Tracey system is also useful as a diagnostic tool to display all optical errors. It will be valuable for custom aplanation when FDA approval is granted.

24-203 LEVEL I: Marketing Health Services
Warren McDonald, PhD
Coronado C
This course provides the attendee with a better understanding of the process and concepts involved in the marketing of health services. The competitive ophthalmic marketplace makes this course a must for practice survival. The focus is on the independent practitioner. Tips are provided to assist in not only survival, but in improving the practice position in the community.

24-204 LEVEL I: Managing Frame Inventory
Amaro bueno, Opt.; Raymond Dennis, MA
Coronado D
This course provides methods for managing the frame inventory in the ophthalmic practice. Most MDs/ODs tend to price the optical products they offer below fair market value. They must learn to position their offerings in the appropriate range of the marketplace. The degree of competition will help determine the pricing limits. Learn how to establish a gross profit target and how to determine if your dispensary has a broad enough product selection to be attractive to patients.

24-205 LEVEL I: Inflammatory Cascade and the Ocular Allergic Response
Charles Slagin, MD
Coronado P, Q
One of the most common ophthalmic conditions that direct a patient to their primary care physician or eyecare practitioner is the red, itchy eye. The large percentage of conjunctivitis is non-infectious (inflammatory). Most of these cases are probably allergic in nature. The ophthalmic armamentarium is now filled with a number of pharmaceutical compounds that have specific actions at different points along the inflammatory cascade. This presentation describes the ocular inflammatory cascade in great detail. We then discuss various topical ophthalmic medications currently available and how they relate to the treatment of the ocular inflammatory process.

24-206A LEVEL II and III: A Systemic Approach to the Diagnosis of Conjunctivitis, 1st Hour
George A. Stern, MD, MBA
Monterrey 1
The ophthalmologist must learn to approach the diagnosis of conjunctivitis in a systematic manner to obtain the most efficacious treatment outcome. This in-depth scientific session provides insights and offers discussion on how this can be accomplished.

24-207A: Keratoconus – When, Why & What to Do!, 1st Hour
Joe Barr, OD, MS, FAAO
Monterrey 2, 3
The CLEK (Collaborative Longitudinal Evaluation of Keratoconus) is reviewed, discussing the relevance of keratoconus within the population. Indications for early detection of the keratoconus are presented, as well as the FDACL (First Defined Apical Clearance Lens) fitting philosophy. Also discussed are surgical intervention indications and fitting philosophies for post-penetration keratoplasty.

24-208: When CRT or Ortho-K Lenses Won’t Center
Ed Bennett, OD, FAAO; Todd Reim, OD
Coronado M, N
Small variations to the design of the retainer lens can position the lens ideally or create misalignment. When lenses position off-center the desired affect not only may not be achieved, but unwanted warpage may occur. Different techniques for improving alignments, as well as comparisons of different theories, give insight on how to remedy problems.

24-209A LEVEL I: A Contact Lens Primer for Ophthalmic Office Staff, – Part I
Woozy Linn, FLCSA, NCLC-AC
Coronado E
This course provides a basic understanding of ocular anatomy and corneal physiology. There is a special emphasis on the conjunctiva, lid, ocular tear, cornea and the relationship between ocular anatomy and contact lens fitting. At the completion of this course, the participant will be able to identify and explain the role of ocular anatomy and physiology in contact lens fitting.

24-210 The Presbyopic Contact Lens Patient: What Do I Do?
Frank Wensneck, MD
Fiesta 6
Presbyopia is a challenge. Through a series of questions, the presbyopic patient is described, and various management alternatives are discussed. Also discussed is the potential new contact lens patient, as well as the patient currently wearing contact lenses. Contact lens fitting options, including monovision, multifocal lenses and modified monovision, are explored. The office routing, including education of staff and patients, as well as potential lens inventories, are discussed. Audience interaction and questions follow.

3:45pm – 4:45pm

24-301B LEVEL II: The Problem Contact Lens Patient Symposium including The Oliver H. Dabezies, Jr., MD, Lectureship by James E. Key, II, MD, 2nd Hour
William Driebe, MD; Peter Donshik, MD; Gary Foulks, MD; Bruce Koffler, MD; James E. Key, II, MD; Zoraida Fiol-Silva, MD
Coronado F, G
This symposium examines the following issues: contact lens related keratitis; diagnosis and management; managing the allergic contact lens patient; dry eyes and blepharitis: how to make contact lenses work. Also, the Oliver Dabezies Lecture explores: Meeting the challenge of presbyopia with contact lenses.

24-302A LEVEL I: Coding Pearls 2003, 1st Hour
Sue Vichrilli, COT
Fiesta 6
If you see Medicare patients and want to document and be paid correctly, this course is for you. Upon completion of this course, participants should be able to identify new coding and documentation requirements affecting reimbursement in 2003, describe techniques for practical application of new guidelines, identify weak areas in coding and documentation that costs the practice income. Discussion provides valuable coding tips assuring compliance in and proper reimbursement in 2003. Coding is a team effort—so bring your staff.

24-303A LEVEL II: Contact Lenses and Corneal Health: How Are New Lenses Better, 1st Hour
Loretta Szczotka, OD
Coronado B
This course primarily demonstrates the clinical and sub-clinical findings associated with extended wear of the "traditional" low Dk hydrogel and RGP lenses, and the changes seen or expected with hyper Dk lenses. Also discussed are complication of inflammation and infection, and the hope that these areas may be better treated with lens materials and solutions.
Ten percent of the population in Japan utilized contact lenses in 2001, and the number of contact lens wearers is still increasing. Recently, ocular troubles related to contact lens wear have been significantly increasing. We organized a joint survey to obtain data on these contact lens related ocular disorders. This survey focused on ocular disorders due to contact lens wear and lens care systems.

Based on the findings of this survey, risk factors of contact lens related ocular disorders in Japan will be discussed, along with methods to minimize these ocular troubles related to contact lens wear.

Furthermore, recent developments in contact lens materials can provide various types of lens wear and fill various needs raised by lens wearers. However, since the ocular surface can be maintained by its complex physiological homeostatic mechanism, even current well-developed lenses cannot be used without adverse effects on the ocular surface.

Therefore, various lenses related to contact lens disorders and their incidence have not been reduced. Various clinical findings caused by contact lenses and the methods of their treatment are presented, along with discussion of therapeutic use of contact lenses for keratoconus and other treatments.

24-305A LEVEL II: When 20/20 Is Not Enough: Quality of Vision Issues with Spectacle, Contact Lenses and Refractive Surgery

Susan Stensm, MD; Srilata Naidu, MD; Kenneth J. Scherick, OD; Christopher Baldy, PhD

Coronado C

Snellen acuity is considered the standard for measuring vision, with 20/20 accepted as the benchmark for “normal.” Advances in optical and refractive technology, however, make visual acuity more than a quantitative measure. Quality of vision, as reflected in visual function and visual comfort, is becoming an increasingly important component of what constitutes good—and acceptable—vision in the real world. Contrast sensitivity will be evaluated as a more reliable and sensitive measure of “true” visual acuity. The importance of glare and excessive light in disturbing and diminishing vision will be discussed, along with the use of fixed tint and photochromic lenses and various lens treatments to minimize adverse effects. Also reviewed: How contact lenses and incision/laser refractive surgery may impact on quality of vision issues and possible solutions to such problems as glare, ghost images, dark adaptation, and light scatter suggested. Discussion also includes the role of ultraviolet (UV)-absorbing spectacles and contact lenses in protecting the eye from potentially dangerous effects of UV.

24-306B Level II: A Systemic Approach to the Diagnosis of Conjunctivitis, 2nd Hour

George A. Stern, MD, MBA

Monterrey 1

The ophthalmologist must learn to approach the diagnosis of conjunctivitis in a systematic manner to obtain the most efficacious treatment outcome. This in-depth scientific session provides insights and offers discussion on how this can be accomplished.

24-307B: Keratoconus – When, Why & What to Do, 2nd Hour

Jae Barr, OD, MD, FAAO

Monterrey 2, 3

The CLER (Collaborative Longitudinal Evaluation of Keratoconus) is reviewed, discussing the relevance of keratoconus within the population. Indications for early detection of the keratoconus are presented as well as the FDACL (First Defined Apical Clearance Lens) fitting philosophy. Also discussed are surgical intervention indications and fitting philosophies for post-penetration keratoplasty.

24-308: Contact Lens vs. Refractive Surgery Patient: Are They Worth It?

Paul Karpecki, OD, FAAO; Barry Eiden, OD, FAAO

Coronado M, N

How can you analyze the contact lens patient and the refractive surgical patient and what the long-term effects on the practice can be? Is one type of patient better than the other? How can you keep the contact lens patient coming back for routine care, and how do you get the refractive surgical patient to come back at all after a few years? This course discusses these issues that affect every practice.

5:00pm – 6:00pm
24-401 LEVEL II: Glaucoma Symposium – 2003 Update on Medical Treatment

Mary Fran Smith, MD; J. William Doyle, MD, PhD

Monterrey 1

This symposium examines: hypotensive lipids, alpha agonists and neuroprotection, aqueous suppressants, and combination drops and future options for treatment. This is followed by audience Q&A.
24-405B LEVEL II: When 20/20 Is Not Enough - Quality of Vision Issues with Spectacles, Contact Lenses and Refractive Surgery, 2nd Hour
Susan Stenson, MD; Srilata Naidu, MD; Kenneth J. Scherick, OD; Christopher Bally, PhD
Coronado C

Snellen acuity is considered the standard for measuring vision, with 20/20 accepted as the benchmark for “normalcy.” Advances in optical and refractive technology, however, make visual acuity more than a quantitative measure. Quality of vision, as reflected in visual function and visual comfort, is becoming an increasingly important component of what constitutes good—and acceptable—vision in the real world.

In this course, contrast sensitivity is evaluated as a more reliable and sensitive measure of “true” visual acuity. The importance of glare and excessive light in distorting and diminishing vision also is discussed, along with the use of fixed tint and photochromic lenses and various lens treatments to minimize adverse effects.

Also discussed are how contact lenses and incision/laser refractive surgery may impact on quality of vision issuers, and possible solutions to such problems as glare, ghost images, dark adaptation, and light scatter. Finally, the role of ultraviolet (UV)-absorbing spectacles and contact lenses in protecting the eye from potentially dangerous effects of UV is discussed.

24-406 LEVEL II: LASIK Complications
Parag Majmudar, MD
Coronado F, G

Laser in situ keratomileusis (LASIK) has become a widely accepted treatment for the correction of ametropias. However, as with any surgical procedure, complications may occur at any stage of the LASIK process, including errors of omission or commission from candidate screening to post-operative management. In this course, aimed at the beginning to intermediate surgeon, participants are exposed to the various pre-operative, intra-operative and post-operative complications associated with the LASIK procedure. Emphasis is placed on primary avoidance and early recognition of LASIK complications to ensure optimal refractive and visual outcomes and enhanced patient satisfaction.

24-407 LEVEL II: Selection of Therapeutic Contact Lenses to Modulate Corneal Wound Healing
Gary Foulks, MD
Coronado P, Q

The evolution of available hydrophilic soft contact lenses now permits a wide selection of therapeutic contact lenses. This course reviews the development of therapeutic contact lenses and their effect upon corneal physiology, based upon oxygen permeability and lens geometry. A summary of the presently available contact lenses that can be used to modulate corneal wound healing is presented. A strategy for selection of contact lenses to achieve optimal corneal wound healing in a number of corneal diseases is provided.

24-408 LEVEL II: Corneal-Scleral Contact Lenses and the Diseased Eye
Christina Sindt, OD
Yucatan 2

This course covers advanced corneal-scleral contact lens fitting techniques as they apply to the diseased eye. Keratoconus, post graft and post-refractive surgery fitting and modifications are covered in depth.

24-409 LEVEL I: Selling Success Through Visual Merchandising
Raymond Dennis, MD
Coronado M, N

This course is designed to assist the experienced dispenser/manager to understand the nature and application of effective visual display of products to increase business in the ophthalmic dispensary. Topics include: using color, lighting sources, lighting techniques and creating focus and balance.

24-410 LEVEL I: Contact Lenses for the Mature Patient
Maritell Schornack, OD
Coronado E

The ever-expanding variety of contact lenses available for the correction of presbyopia can make initial contact lens consultations time-consuming for practitioners and confusing for presbyopic patients. This course introduces an outline for presentation of options that will help presbyopic patients develop realistic expectations for contact lens correction. It also will assist the practitioner in choosing the modality that will best meet the patient’s visual needs. Following this course, participants will understand potential compromises inherent in various forms of presbyopic correction, and be able to determine the most appropriate mode of correction for an individual patient during the initial interview.

6:00pm – 7:30pm

25-101 LEVEL II: Keratoconus Symposium
Henry Perry, MD; George Stern, MD, MBA; David Metzler, MD; Penny Asbell, MD
Fiesta 5

This symposium examines the following issues: When is corneal transplantation indicated for keratoconus? Prescribing Intacs for keratoconus, management of keratoconus astigmatism: relaxing incisions and compression sutures. Also discussed is management of keratoconus post-keratopasty astigmatism: LASIK vs. PRK. Audience Q&A follows.

25-102 LEVEL II: The Best of CLAO Research Symposium – Optics and Contact Lenses
Moderator: Zoraida Fiol-Silva, MD
Speakers: Kenneth Lebow, OD, Li Yuan-yun, MD; Michael Christensen, OD, PhD; Marcelo Sobrinho, MD; James McHale, MD
Coronado B

This symposium examines the following issues: Evaluation of corneal staining and patient preferences with use of three multi-purpose solutions and two brands of soft contact lenses; an effect of suny Boston RGP contact lens on anisometric amblyopia; and a comparison of treatments for lysozyme removal from high water ionic contact lenses. Also discussed: Do economic and social factors play an important role in relation to the compliance of contact lens care routines? Finally, there is a presentation of optical wavefront analysis of uncorrected and contact lens-corrected vision. Audience Q&A follows.

25-103 LEVEL II: Optical Aberrations and Functional Vision: What You Need to Know
Mark Facher, MD
Coronado C

New technology in cataract and refractive surgery has engaged a new emphasis on quality of vision beyond simple visual acuity. Sine wave grating contrast sensitivity testing is gaining increased recognition as a valuable tool for measuring functional vision. It has been proven to provide a more sensitive and comprehensive measurement of visual performance than is provided by Snellen acuity. At the same time, wavefront-sensing technology allows optical scientists and surgeons to understand the basis of changes in contrast sensitivity with aging and disease. Surgeons now have the opportunity to apply these advances for the benefit of their cataract and refractive surgery patients. This course
reviews the psychophysical basis of contrast sensitivity testing, explores the evidence linking contrast sensitivity to health quality of life and explains the optical basis of wavefront sensing.

**25-104 Level I: Running A Profitable Contact Lens Practice Symposium**

Joseph L. Bacetti, MD; Craig W. Norman, CO, FCLSA; James E. Key, II, MD

**Coronado E**

This symposium presents success strategies for a variety of types of practices. These include the solo comprehensive doctor with limited contact lens services, the large group practice with total contact lens services, and also the group practice with multiple offices and total contact lens services. There is also audience Q&A.

**25-105 LEVEL I: Silicone Hydrogel Extended Wear Contact Lenses**

Jane Spasholt, MD

**Coronado D**

This course provides an overview of the new silicone hydrogel extended wear lenses, as well as problems and how these are solved. Also discussed are advantages and why these new materials are excellent and a very good alternative for many patients.

**25-106 LEVEL II: Managing Soft Contact Lens Complications**

William Driebe, MD

**Coronado P, Q**

A systematic approach is essential when caring for patients with soft contact lens pathology. This course addresses seven major problem areas. The “practical approach” is stressed. Topics include: improper lens care and infections, patient factors affecting successful lens wear, problems with lens fit, lens deposits, solutions allergies, sterile corneal infiltrates, and GPC. Also discussed is the diagnosis and treatment of difficult corneal infections associated with contact lens wear such as akanthamoeba, pseudomonas, and fungal keratitis.

**25-107 LEVEL II: Reshaping the Normal Myopic Cornea**

Bruce Kfiffer, MD

**Monterrey 1**

Corneal Refractive Therapy (CRT) has enjoyed a renewal of interest over the past five years. This is due to the development of technology for automated lathes that can create RGP lenses of high DK values in unique shapes. These lenses work within days to weeks to correct spherical and astigmatic errors. This course reviews the history of corneal molding and brings us up to the CRT lens recently approved by the FDA for over-night wear. Safety and efficiency data leading to this approval are presented. Also offered is a mini-course on how to fit the lens and avoid complications. Fitting tips from personal experience are discussed.

**25-108: Contact Lenses & Pediatrics**

Loretta Szczotka, OD, FAAO

**Coronado M, N**

This course presents forms of contact lens corrections for the pediatric contact lens patient. Medically indicated contact lens corrections are highlighted, including Silsoft, RGP lenses and hydrogels. Also covered are medically indicated lens prescribing that includes aphakia, trauma, aniridia and irregular astigmatism. Myopia control studies with RGP lenses for adolescents are discussed.

**25-109: Taking Soft Torics to the Next Level**

Peter Bergenske, OD, FAAO

**Monterrey 2, 3**

Soft torics can be straightforward to prescribe unless there are problems. This course addresses what to do to turn problems into success by using tools such as over-refraction.

**25-110 LEVEL II: The Surgical Correction of Presbyopia**

Harold Stein, MD

**Coronado F, G**

Refractive surgery has a new thrust in this decade, to correct the last frontier: presbyopia. We feel we are on the threshold of eliminating reading glasses by surgery. A number of clinical approaches are being pursued. Our experiences with this new refractive surgery, its successes and failures, are reviewed. Complications are also discussed.

**25-111 LEVEL II: CLSA General Session – Free Papers**

Diane Broe, FCLSA

**Fiesta 6**

**MICHAEL A. WARD, MMSC, FCLSA, FAAO**

Emory University Eye Center

“Risk Factors and Prognosis for Corneal Extasia Following Ablative Corneal Surgery”

This lecture outlines known risk factors and potential risks for developing corneal extasias following refractive surgery. Specific visual management techniques are presented.

**BUDDY RUSSELL, FCLSA**

Emory University Eye Center

“Fitting Infants with Contact Lenses Following Cataract Extraction”

This presentation describes the advantages and disadvantages of the various lens materials in pediatric fitting, explains the importance of every treatment, and identifies the instruments necessary to fit pediatric patients.

**Theodore Obrig Memorial Lecture: “Light My Optics”**

MICHAEL S. GZIK, FCLSA

New York Optometric

The science of optics has played a significant role in the technological advancements of mankind. This historical look at light and optics explores man’s utilization of this science from early microscopes through the Hubbell space telescope, lasers and scanning electronic microscopes. Our world of light and optics is a wonderful blend of science and imagination. As optical health care providers, we play an integral role in our society’s perception of humanity.
Contact Lenses Today and Tomorrow
An Overview of Cutting Edge Contact Lens Research from Around the Globe
Coronado L

Session Leader
BRIEN A. HOLDEN, PhD, FAAO
Scientia Professor, University of New South Wales;
CEO, The Cooperative Center for Eye Research and Technology (CRCERT)

This two-hour symposium brings together a variety of perspectives on exciting new developments in contact lens research—and peers into a crystal ball for what new modalities and opportunities will emerge in the near future.

World-renowned researcher Brien Holden, PhD, FAAO, will lead the session and will be joined by esteemed colleagues, who will present on the following subjects:

The Impact of Contact Lenses on Corneal Homeostasis
Patrick Ladage, PhD

Dryness, Dry Eyes and CL Materials
Desmond Fonn, MOptom

Corneal Reshaping with GP Lenses
John Mountford, OD

Corneal Onlays
Debbie Sweeney, PhD

Following individual presentations, Brien Holden will host a lively discussion between presenters and with audience participation.

8:00am – 12:15pm
25-801 CLAO/JCAHPO Program: Tech II Intermediate/Advanced
Yucatan 2

8:00am – 9:00am
Ptosis and Other Abnormalities of Lid Position
Diana Shamis, CO, COMT

This presentation provides a discussion of the anatomy and physiology of the lids. Conditions which may cause an abnormal lid position and the techniques for proper evaluation are presented.

9:00am – 10:00am
Glaucoma Medications
Fran Smith, MD

This course includes a discussion of the current therapeutic options for the glaucoma patient. Pharmacologic phenomena, target population, mode of action, indications and contraindications of each are highlighted.

10:15am – 11:15am
The Pupil
Lisa Fraine, CO, COMT

This presentation covers the anatomy and innervation of the structures involved in the neurologic pathway of light, near and pharmacologic pupillary response. Normal pupillary phenomena are reviewed. Abnormal pupillary state are presented as well as techniques for proper evaluation.

11:15am – 12:15pm
Corneal Dystrophies and Degenerations
Peter Donshik, MD

This course presents corneal disorders classified as dystrophies and degenerations. This includes anterior, stromal, posterior and ectatic dystrophies as well as conjunctival and corneal degenerations. Pathophysiology, clinical appearance, diagnostic tests, hereditary patterns, and management are also discussed.

9:15am – 11:15am
01-25 LEVEL II: CLES General Session – The Future of Contact Lenses
Brien Holden, PhD, FAAO
Coronado L

This two-hour symposium brings together a variety of perspectives on exciting new developments in contact lens research—and peers into a crystal ball for what new modalities and opportunities will emerge in the near future.

World-renowned researcher Brien Holden, PhD, FAAO, will lead the session and will be joined by esteemed colleagues, who will present on the following subjects:

- The Impact of Contact Lenses on Corneal Homeostasis
- Dryness, Dry Eyes and CL Materials
- Corneal Reshaping with GP Lenses
- Corneal Onlays

Following individual presentations, Brien Holden will host a lively discussion between presenters and with audience participation.

11:15am – 11:45am
CLSA Annual Business Meeting & Elections
CLSA members only
Coronado L

11:30am – 2:30pm
Exhibit Hall Open with Lunch
Coronado H, J

1:00pm – 4:45pm
25-802 CLAO/JCAHPO Program: Tech II Intermediate/Advanced
Yucatan 2

1:00pm – 1:45pm
Keratometry in the Ophthalmic Practice
Zoraida Fiol-Silva, MD

This presentation provides an overview of keratometry including optics, set up, obtaining measurements, indications, adjustments for high and low powers. Also presented is the correlation between K-readings and clinical pathologies, such as keratoconus, Pellucid marginal degeneration and corneal transplantation. Use of the keratometer for contact lens fittings is also addressed.

1:45pm – 2:30pm
Syndromes with Ocular Involvement
Mary O’Hara, MD

In this course, various syndromes with oculocutaneous involvement are presented. These include: Duane’s Retraction Syndrome, Goldenhar Syndrome, Brown Syndrome, Monofixation Syndrome, Moebius Syndrome, Marcus Gunn Jaw Winking Syndrome, Marfan Syndrome, Apert and Crouzon Syndrome and Down Syndrome. Ocular and systemic manifestations of each are illustrated by case presentations.

2:45pm – 3:45pm
Valuing and Managing Diversity in the Workplace
David Johnson, MA

This course discusses how to manage diversity effectively in the workplace as an employee or manager. Behaviors that support a respectful work environment are presented. Also discussed are tools for leaders to manage employees in a complex and caring work environment.

3:45pm – 4:45pm
Surgical Treatment of Glaucoma: Pre to Post-Op
William Doyle, MD, PhD

This course describes the surgical treatment of glaucoma by laser, incision and implants. Specific procedures discussed include laser iridotomy, goniotomy, trabeculectomy, and cyclophotocoagulation. Surgical techniques described include trabeculectomy, goniotomy, and glaucoma tube shunts. The use of antimetabolites is also discussed. Indications for surgery as well as potential post-operative complications are presented.
2:30pm – 3:30pm

25-201A LEVEL II: The Future of Refractive Surgery Symposium including The Richard L. Lindstrom, MD, Lecture by Raymond M. Stein, MD, 1st Hour
David Medeiros, MD; William Luthers, MD; Paraj Majmudar, MD; Raymond M. Stein, MD; Sam Omar, MD; Richard Eberman, MD; Mark Tucker, MD
Fiesta 6
This symposium explores a number of key issues related to refractive surgery, including: phakic IOLs: the future? and the future of wound healing modifiers in refractive surgery. Also in this session is the Richard Lindstrom, MD, Lecture, this year entitled: "Innovative Microsurgical Techniques to Enhance Refractive Outcomes." The presentation of Lindstrom Award is then made.

25-202 LEVEL II: What’s New in Dry Eye Treatment
Henry Perry, MD
Monterrey 1
What’s new in dry eye treatment for 2003? A short review of current treatment modalities serves as a prelude, highlighting new drugs and treatments available for dry eye patients. Included in this discussion are the effects of meibomian gland dysfunction on the diagnosis of dry eye disease. Endura, Millennium plugs and Cyclosporine will be analyzed in terms of their place in the treatment paradigm for dry eye patients.

25-203A LEVEL I and II: OMIC Malpractice, 1st hour
Paul Weber, JD
Coronado P, Q
Informed consent issues arise in virtually all LASIK surgery claims and lawsuits. This course reviews the most common consent problems that arise and offers suggestions on how to minimize the risk of loss by utilizing communication and documentation techniques. This course provides an overview of the legal issues needed to prove lack of informed consent. Specific clinical risks addressed include clinical side effects such as dry eyes, night vision problems, and specific cornea problems such as sub-clinical pellucid marginal degeneration, corneal ectasia, etc. and discussed are co-management, bilateral simultaneous, monovision, and off-label uses and new technology.

25-204A: RGP’s for the Everyday Patient
Ed Bennett, OD
Monterrey 2, 3
RGPs are often the best answer for a patient’s needs but are overlooked or not even presented as an option. The misconception of comfort and maintenance can be readily addressed when presenting this to patients. The following issue are covered, with the aide of video presentation: Who is the best choice for RGPs and how to get started and what designs to consider. Also addressed are remedies for problems such as unintentional orthokeratolgy, corneal warpage and 3 and 9 staining. Myopia control for both kids and adults also is covered.

25-205: Contact Lens Myths
Oracene Young, M.Opt.
Coronado M, N
Most areas of the contact lens practice are permeated with myths and misconceptions. Some merely cause confusion while others result in reduced standards of contact lens care. Reviewed here are 12 common contact lens myths relating to contact lens design, fitting, assessment, after-care and lens wearing advice.

25-206 LEVEL II: Presbyopic Options, the Future is Now
Diane F. Drake, FCLSA, NCLC-AC, ABOM
Coronado D
Presbyopia to some people may appear to be a curse, while to others it appears to be an emergence into bigger and better things. To the eyecare professional, it can be a challenge or it can be an opportunity to enhance one’s professional status by meeting the demands of seniors, “Baby Boomers,” and very soon, “Generation X.” This course introduces the participant to the needs of the presbyope and presents various ways of meeting those needs.

25-207A LEVEL II: Common Sense Approach to In-House Modifications, Part I
Keith Parker, NCLC
Coronado B
This hands-on course teaches techniques to accommodate lens design changes to provide a more optimum fitting relationship. Discussed here are basic contact lens construction and explanation of lens parameters determining comfort. Also demonstrated is a common sense approach to in-office modification of rigid lens parameters to alleviate fitting complaints.

25-208 LEVEL III: Let’s Not Forget our Best Option – RGP Multifocals
Judith A. Perrigin, OD
Coronado F, G
RGP multifocals provide consistently clear and comfortable vision for presbyopes. Discussed here are patient selection, motivation, and adaptation as well as available lens designs. Fitting tips to maximize success also are presented.

25-209 LEVEL III: Orthokeratology in Mild to Moderate Keratoconus
Nick C. Siviglia, ScD, PhD, FCLSA; Judith Siviglia, NCLC
Coronado C
This course is designed to educate eyecare practitioners that some keratoconus patients can experience the same level of success in controlling and reducing myopia as normal myopic patients, without keratoconus disease. Reviewed here are keratoconus diagnosis, corneal topography and “K” readings, and developing a plan and method of treatment.

25-210C LEVEL I: A Contact Lens Primer for Ophthalmic Office Staff, Part III
Woody Linn, FCLSA
Coronado E
This course provides a basic understanding of contact lens related terminology. Explained and illustrated are important features of soft and GP lens design and their basic role in achieving comfortable and safe contact lens wear. Course participants completing this course will be able to identify and explain the important features of a contact lens.

S A T U R D A Y C L A O C O U R S E
3:45pm – 4:45pm First hour
5:00pm – 6:00pm Second hour
Recognizing and Handling Unusual Contact Lens Problems
Monterrey 1
Session leader
PETER KASTL, MD
Professor of Ophthalmology Tulane University
Course Presenters: Bruce Koffler, MD; Michael A. Ward, MMSc, FCLSA, FAAO; Charles Slonim. MD
This two-hour course teaches contact lens specialists to solve problems by prescribing all types of soft and GP contact lenses. Patients with moderate astigmatism usually require soft toric or spherical GP lenses. However, sometimes these lenses fail to adequately correct a patient’s astigmatism. For large corneal astigmatism or residual astigmatism, toric GP fitting can be required. This course teaches fitting methods for:
- Bitoric lenses
- Front toric lenses
- Prism ballasted bitoric lenses
- Soft toric contact lenses

Contact Lens and Eyecare Symposium 23
This symposium explores a number of key issues related to refractive surgery, including phakic IOls: the future? and the future of wound healing modifiers in refractive surgery. Also in this session is the Richard Lindstrom, MD, Lectureship, this year entitled: “Innovative Microsurgical Techniques to Enhance Refractive Outcomes.” The presentation of Lindstrom Award is then made.

25-302A Level II: Recognizing & Handling Unusual Contact Lens Problems, 1st Hour
Peter Kastl, MD, PhD; Bruce Köffler, MD; Michael A. Ward, MMSc; FCLSA; FAAC; Charles Sönim, MD
Monterrey 1
Contact lens fitters should fit all types of soft and rigid contact lenses. Patients with moderate astigmatism usually require soft toric or spherical RGP lens fitting. However, sometimes these lenses do not correct a patient’s astigmatism correctly. Toric rigid lens fitting can be required for large corneal astigmatism and/or residual astigmatism. This course teaches fitting methods for bitoric lenses, front toric lenses, and prism ballasted bitoric lenses, as well as for soft toric contact lenses.

25-303B Level I and II: OMIC Malpractice, 2nd hour
Paul Weber, JD
Coronado P, G
Informed consent issues arise in virtually all LASIK surgery claims and lawsuits. This course reviews the most common consent problems that arise and offers suggestions on how to minimize the risk of loss by utilizing communication and documentation techniques. This course provides an overview of the legal issues needed to prove lack of informed consent. Specific clinical risks addressed include clinical side effects such as dry eyes, night vision problems, and specific cornea problems such as sub-clinical pellucid marginal degeneration, corneal ectasia, etc. Also discussed are co-management, bilateral simultaneous, monovision, and off-label uses and new technology.

25-304B: Toric Rigid Contact Lens Design
Peter Bergenske, OD, FAAO
Monterrey 2, 3
Understanding the optics and physical attributes of rigid lenses with toric surfaces is the fundamental step to being able to apply these tools in practice. This course covers the principals behind designing rigid lenses for the astigmatic patient.

25-305: Measuring the Normal & Abnormal Cornea
Loretta Szczezka, OD, FAAO
Coronado M, N
Measuring and analyzing the cornea has come a long way since Jarval. In this course, keratometers and first and second generation topographers are compared. Also, new instruments, like wave front topographers, are reviewed. The use of topography in disease detection, diagnosis, and refractive surgery screening is discussed. Also, there is discussion of applications to aid the practitioner in prescribing contact lenses for the regular and irregular astigmatism, including keratoconus, as well as time saving features for fitting soft and RGP lenses.

25-306 Level II: Diagnosis & Management of Contact Lens Induced Red Eye
R. Lee Hewitt, FCLSA
Coronado F, G
This course helps the contact lens technician to differentiate between minor contact lens induced red eye and serious eye threatening complications. Participants diagnose fitting problems and learn how to correct them. Contact lens solution reactions are addressed, as well as the elimination of compliance issues via careful patient interview. The participant learns what steps to take to establish whether the red eye is, in fact, caused by contact lens wear.

25-307B Level II: Common Sense Approach to In-House Modifications, Part II
Keith Parker, NCLC
Coronado B
This hands-on course teaches techniques to accommodate lens design changes to provide a more optimum fitting relationship. Basic contact lens construction and explanation of lens parameters determining comfort are discussed. Also demonstrated is a common sense approach to in-office modification of rigid lens parameters to alleviate fitting complaints.

25-308 Level I: Applying the Principles of Triage to Contact Lens Emergencies
Phyllis L. Rakow, FCLSA, COMT, NCLC-AC
Coronado D
Triage is the process of sorting the sick and wounded based on the seriousness of their condition and the urgency of care needed. What constitutes a true emergency? Signs and symptoms of ocular emergencies, including problems that may mimic contact lens related pathology, are discussed and illustrated. This course is valuable not only for contact lens technicians, but also for front desk personnel who handle telephone and walk-in emergencies and must decide on how to schedule them.

25-309 Level III: Integration of Silicone Hydrogels vs. Single Use Lenses in Your Practice
Jean Ann Vickers, FCLSA; Wanda Fisher, COA, NCLC, Miha Hague, COA, NCLC; Garri McCuekin, NCLC, COT; Keri West, NCLC, COA
Coronado C
This course, which includes information provided by members of the Dean McGee Eye Institute Contact Lenses Department, focuses on adoption of new high oxygen silicone hydrogel lenses into the main stream of the current disposable lens population. A methodology for selection of specific lens design is offered by looking at various case histories. This course is designed for all levels and provides an updated understanding of new technologies. Attendees learn how and when to make the appropriate decision.

25-310D Level I: A Contact Lens Primer for Ophthalmic Office Staff, Part IV
Woody Linn, FCLSA
Coronado E
This course provides an understanding of contact lens insertion and removal techniques for both soft and GP lenses. This “hands-on” course stresses patient compliance and its importance to safe contact lens wear. Participants completing this course will be able to explain and demonstrate the proper technique for insertion and removal.

5:00pm – 5:30pm
CLSA Scholarship Exit Meeting
Fiesta 7, 8

5:00pm – 6:00pm
25-401 Level II: Management of Dry Eye and Meibomian Gland Disease
Gary Fouks, MD
Coronado F, G
Tear film instability due to dry eye and meibomian gland disease is a major cause of discomfort and discontinuation of contact lens wear. This course reviews the mechanisms producing tear film instability and the patterns of occurrence. A summary of the consequences of tear film instability to contact lens wear is presented. New information about the pathogenesis of dry eye disease and meibomian gland disease will lead to a review of a recommended management strategy, including physical, medical, and nutritional supplement options.
Contact lens fitters should fit all types of soft and rigid contact lenses. Patients with moderate astigmatism usually require soft toric or spherical RGP lens fitting. However, sometimes these lenses do not correct a patient’s astigmatism correctly. Toric rigid lens fitting can be required for large corneal astigmatism and/or residual astigmatism. This course teaches fitting methods for bitoric lenses, front toric lenses, and prism ballasted bitoric lenses, as well as for soft toric contact lenses.

25-404 LEVEL II and III: Pharmacology Symposium – Current Status of Fluoroquinolones
David Metzler, MD; Richard Eiferman, MD; Henry Perry, MD; Charles Slonim, MD; Francis Mah, MD
Coronado M, N
This symposium provides an update discussion of the current status of the group of ocular pharmacuels collectively known as the fluoroquinolones. Also discussed are promising new pharmacological agents in this same group.

25-405 Level II: Advances in Corneal Reshaping with Contact Lenses
Patrick Caroline, FCLSA, FAAO
Coronado P, Q
The technique of corneal reshaping with RGP lenses (orthokeratology) is gaining widespread acceptance as a safe and effective alternative to refractive surgery. The modern renaissance of this technique has been dramatically influenced by the introduction of the following factors: new lens signs that produce rapid and dramatic alterations in corneal curvature; advances in new high Dk, RGP lens materials for enhanced physiologic response to the lens in the overnight, closed eye environment; advances in corneal mapping techniques to aid in more accurate first fit lens selection and improved spot-fitting patient management; and new concepts related to the physiology of tissue displacement providing a clearer understanding as to how corneal reshaping works. These evolutionary advances have dramatically changed the modern practitioner’s view of corneal reshaping. Today, the procedure has evolved from a specialty practiced by only a handful of practitioners, to a technique that can be successfully incorporated into almost any eyecare practice.

25-406 LEVEL II: The Continuing Evolution of Contact Lens Care System
Phyllis L. Rakow, FCLSA, COMT, NCLC-AC
Coronado C
Contact lens care is constantly changing. Currently, over 200 national brand and generic contact lens solutions are on the market. Few practitioners or patients have an in-depth understanding of the preservatives and active ingredients in these solutions and what reactions or interactions can occur if incompatible solutions are used. This course discusses FDA lens groups and how lenses in each group are affected by the chemicals in care products. Cleaning, rinsing, storage, disinfecting, and lubricating solutions are discussed.
Advantages and disadvantages of each major care system are discussed, with emphasis on the changes that have taken place in multipurpose and oxidizing “no-rub” disinfection systems. Slides are used to illustrate ocular pathology caused by patient noncompliance.

25-407 LEVEL I: Emerging Trends in Contact Lenses
Mark Andre, FCLSA, FAAO
Coronado D
This course discusses the latest lens modalities and fitting techniques that will shape the future of the contact lens industry. Included in the discussion are fitting tips and lens designs for orthokeratology and high Dk scleral RGP lenses. We also discuss the newest soft lens designs and look at the possible impact that these new modalities will have on our practices. We will also share fitting tips on how to manage refractive surgery patients both pre-operatively and post-operatively.

25-408 LEVEL I and II: Refractive Success and 100 Percent Patient Satisfaction: Refractive Surgery and Contact Lenses
Sam Omar, MD
Coronado E
Patient expectation and satisfaction have created an increasingly sophisticated interdependence between contact lens technology and kerato-refractive surgery. The parallel development of refractive surgery and contact lens technology have provided refractive surgeons, clinical, and technicians a full spectrum of contact lens technology to educate, treat, and modulate the modern kerato-refractive experience. In order to maximize refractive success and provide patients with maximal perceived satisfaction, contact lens technology is providing an increasingly critical role in the pre-operative, operative, and post-operative management of refractive surgery patients. Case presentations and clinical scenarios are reviewed in an interactive audience setting. The goal is to allow refractive surgeons, clinicians and technicians to develop an understanding of clinical applications of contact lenses for refractive surgery.

25-409 LEVEL I: Why Isn’t My Dispensary More Profitable?
Art Degenmaro, Opt
Coronado B
This course focuses on creating active interest and involvement on the part of the doctors, as well as every member of the practice team, to support the dispensary. To achieve success, everyone involved needs to view, conceptualize, and operate the dispensary as a honest-to-goodness retail business. Discussed here are key factors in most failed dispensaries: poor planning, incorrect positioning, poor integration, the physician’s role, insufficient human resources, and no performance documentation.

25-410 LEVEL I: Refractophobia
William Ehlers, MD
Monterrey 2, 3
This course provides basic instruction in refraction. Although principles of optics are discussed, the use of formulas are minimized. A course hand-out is provided, including a collection of “refractive pearls.”

5:30pm – 6:30pm
CLSA Past President’s Reception
President’s Suite

7:00pm – 10:00pm
Closing Party
Sponsored by CLES Platinum Sponsors
SeaWorld

Buses depart hotel to Sea World from 6:30pm–7:30pm

SUNDAY January 26, 2003

7:00am – 11:00am
CLEA Registration
South Registration

7:00am – 7:30am
Continental Breakfast
Sponsored by Vistakon
Monterrey Foyer

7:30am – 9:00am
CLAO Scientific Program Committee
Cancun

7:30am – 9:30am
26-101: Jurisprudence for the Optometric Practice
Ray Pieric, OD
Coronado E, F, G
The goal of this presentation is to provide a practical understanding of Florida statutes relating to the practice of optometry in Florida. Additionally, this course meets the Florida two-hour CE requirement for biennial license renewal.
9:45am – 10:45am

26-201: HIV/AIDS
Margarite Ball, OD

Coronado E, F, G

Clinicians gain insight into the definition, epidemiology, immunopathogenesis, transmission, prevention, and treatment of HIV/AIDS infection. In addition, the ocular complications, their current treatment modalities, and the appropriate co-management role of the eyecare practitioner are discussed.

11:00am – 1:00pm

26-301: Medical Errors
Mary Loshin, OD

Coronado E, F, G

This course is designed to satisfy the requirements of Florida Statute 456.013 (7) relating to the prevention of medical errors as part of the licensure and renewal process. The course includes a study of root cause analysis, error reduction and prevention and patient safety.

AMA Physician’s Recognition Award

The Contact Lens Association of Ophthalmologists (CLAO) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. CLAO designates the 2003 Contact Lens and Eyecare Symposium educational activities for a maximum of up to 22 hours in category 1 credit toward the AMA Physicians’ Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

Possible CME Hours:

- Thursday, January 23: 6 hours
- Friday, January 24: 6 hours
- Saturday, January 25: 6 hours
- Scientific Poster: 4 hours

CME credit documentation for physicians may be obtained at the CLES Continuing Education Desk on Sunday, January 26, 2003, or upon written request to CLAO.

Procedures for Obtaining CE Credit

CLSA, CLAO and AOA have applied to the following organizations for continuing education credit for courses offered at CLES. Each organization requires its continuing education sponsors the follow procedures:

1. Sign the “Course Sign-In Roster” at the table at each course and general session. Be sure to sign your name legibly, and check the appropriate certifying or licensing body from which you are requesting credit. If your name does not appear on the Sign-In Roster, you will not receive credit for attendance at the course.

Council on Optometric Practitioner Education (COPE)
Florida Board of Optometry
Joint Commission on Allied Health Personnel in Opthamology (JCAHPO)
National Contact Lens Examiners (NCLE)*
Ohio Opticians Board
Ontario Canada College of Opticians
South Carolina Board of Opticianry
Tennessee Board of Opticianry

2. NCLE Note: Upon entering the class room, you will be handed a CE form. Write your name on each of the three sections of the form and complete the evaluation at the bottom of the form before the end of the course. Turn in the evaluation to the CE clerk at the door upon leaving, and have your CE form verified with the CLES stamp.

International Attendees

International attendees who wish to receive a “Certificate of Attendance” may do so by requesting it at the CLES registration desk.
Full Page CooperVision Ad
Map of Exhibitors
(As of January 3, 2003)

CLES Exhibit Hall Hours
Thursday: 5:30pm – 7:30pm with reception
Friday: 11:30am – 2:30pm with lunch
Saturday: 11:30am – 2:30pm with lunch
Among the well-known contact lens care products that really work! Whether in preservative-free unit-dose for sensitive eyes or in the bottle with its vanishing preservative, hypotonic TheraTears wets and rehydrates dry eyes. **Booth #305**

**Alcon Laboratories**
6201 South Freeway
Fort Worth, TX 76134
(800) 451-3937
www.alconlabs.com

Alcon Laboratories is a manufacturer of contact lens solutions and ocular pharmaceuticals. Products include: NO RUB OPTI-FREE EXPRESS Multi-Purpose Disinfecting Solution approved for all soft lenses, Unique pH Multi-Purpose Solution for RGP lenses, CLR2 Plus Lens Drops and Tears Naturale Forte Lubricant Eye Drops, also: CLIOXAN Solution and Ointment, PATANOL Solution, and a new prostaglandin analog product for glaucoma, TRAVATAN (travoprost ophthalmic solution) 0.004%. **Booth #109**

**Almay, Inc.**
1501 Williamsboro St
Oxford, NC 27565
(800) 992-5629
www.almay.com

Almay offers a complete line of hypo-allergenic, fragrance-free, ophthalmologist-tested eye products suitable for the contact lens wearer and the patient with sensitive eyes. **Booth #304**

**Advanced Medical Optics**
1700 East St. Andrews Place
PO Box 25162
Santa Ana, CA 92799
(866) 427-8477
www.amo-inc.com

Advanced Medical Optics, Inc., (AMO) is a global leader in the development, manufacturing and marketing of medical devices for the eye and contact lens care products. The company focuses on developing a broad suite of innovative technologies and devices to address a wide range of eye disorders. Products in the ophthalmic surgical line include foldable intraocular lenses, phacoemulsification systems, viscoelastics and related products used in cataract surgery and microkeratomes used in LASIK procedures for refractive error correction. Among the well-known ophthalmic surgical product brands the company possesses are COMPLETE®, COMPLETE® Blink-N-Clean®, Conseat® F, Conseat® 1 Step, Oxysept® 1 Step, Ultracear®, Ultraceyze® and Total Care®. Amadeus is a licensed product of, and a trademark of, SIS, Ltd. OptiEdge is a trademark of Ocular Sciences, Inc. **Booth #315**

**Art Optical Contact Lens, Inc.**
PO Box 1848
Grand Rapids, MI 49501-1848
(800) 253-9364
www.artoptical.com

Art Optical is the nation’s leading GP lens manufacturer. Stop by to learn about MagniClear and MagniClearPlus, the latest innovations in presbyopic correction. Also, register to win in our “pick your prize” drawing. At Art Optical, we’re driven by your GP challenges, and we’re focused on your GP lens success! **Booth #400**

**Bausch & Lomb**
1400 North Goodman Street
Rochester, NY 14609
(800) 344-8815
www.bausch.com

Bausch & Lomb is the preeminent global technology-based healthcare company for the eye. The company is dedicated to helping consumers see, look and feel better through innovative technology and design. The core business includes the manufacture of soft and GP contact lenses, lens care products, ophthalmic surgical and pharmaceutical products. **Booth #215**

**Boucher Communications, Inc.**
1300 Virginia Drive, Suite 400
Fort Washington, PA 19034
(215) 643-8137
www.boucher1.com

BCCI is the vision care industry's fastest growing trade association. BCI also operates the Health Care Conference Group, which organizes and manages educational conferences; and BCI Research Services. All of BCI's professional resources are represented online, including the new, fully interactive VisionCareClassifieds.com and VisionCareClassifieds.com sites. They all can be accessed via the company’s main Website: www.boucher1.com. **Booth #209/210**

**Blanchard Contact Lens, Inc.**
350 Harvey Road
Manchester, NH 03103
(800) 367-4009
www.blanchardlab.com

Blanchard Contact Lens manufactures soft aspheric multifocal and GP aspheric multifocal contact lenses utilizing “S Form” technology, a proprietary manufacturing process. Soft lenses include ESSTech PS and PSD, SV38, Quattro Quarterly Replacement, ESSential Soft Toric Multifocal. Gas Permeable lenses include Essential GP Multifocal, ESSential Xtra GP, TASA, CentraCone, Bi-Sym CentraCone and CentraGraft. **Booth #310**

**CIBA Vision Corporation**
A Novartis Company
11460 Johns Creek Parkway
Duluth, GA 30097-1556
(800) 241-5999
www.cibavision.com

CIBA Vision is a global leader in research, development and manufacturing of optical and ophthalmic products and services, including contact lenses, lens care products and ophthalmic surgical products. Ciba Vision products are available in more than 70 countries. Ciba Vision is the eye care unit of Novartis AG, a world leader in healthcare. **Booth #125**

**Contact Lens Association of Ophthalmologists (CLAO)**
The Contact Lens Association of Ophthalmologists (CLAO) was founded in 1963, and 2003 represents the association's 40th anniversary year. The mission of CLAO today is “To advance quality medical eye care for the public by providing comprehensive ophthalmologists and other eye care professionals with education and training in contact lens, refractive surgery, optical dispensing and related eye care science.” The association publishes a peer-reviewed **CLAO** Journal, which has the distinction of being referenced by Index Medicus. It also produces a member newsletter **CLAO**gram Online along with texts, patient information brochures and other publications dealing with contact lenses, optical dispensing and refractive surgery. **Booth #518/520**

**Contact Lens Manufacturers Association (CLMA)**
P. O. Box 368
Kensington, MD 20895
(301) 231-8544
www.clma.net

The Contact Lens Manufacturers Association (CLMA) is the professional association for laboratories, material, solution and equipment manufacturers in the United States and abroad. Organized in 1961, the CLMA expanded it's mission in 1985 to include the RGP Lens Institute (RGFII) as its educational division. **Booth #106**
The Contact Lens Society of America (CSLA) was founded in 1955, is a non-profit membership organization dedicated to providing quality education to practicing contact lens professionals. The CSLA is proud to include as members more than 1,000 contact lens specialists in more than 20 countries, who are practicing in the fields of opticianry, ophthalmology and optometry. Booth #112/114

CooperVision manufactures premium contact lenses that include: Preference, Preference Toric and XR, Hyrosurf Toric and Options, CV Encore Toric, Frequency SS Toric and XR, Frequency SS sphere, Frequency SS Aspheric lenses and Frequency SS Multifocal. Our cosmetic line includes Experiences disposable opaques, Cooper Prosthetic Lens, and Crazy Lenses novelty lenses. Booth #409

Eversil Contact Lens Division
13515 North Stemmons Freeway
Dallas, TX 75234
(800) 366-3933
www.eversil.com

Eversil Contact Lens Division is the Contact Lens Division of Essilor Laboratories of America, Inc. (ELOA) consists of eight regionally located laboratories and customer service centers. ELOA labs are nationally recognized for the quality of their products and service. We provide today’s eyecare practitioners with innovative contact lens products, which include Easy-Focus No-Line Multifocal lenses for the presbyopic patient, and ComfortFLOW, a unique design that reduces peripheral bearing to maximize initial comfort. Booth #205

eyeMaginations
8600 LaSalle Road, Suite 321
Towson, MD 21286
(410) 521-5481
www.3d-eye.com

EyeMaginations 3-D multi-media animations provide effective communication, minimize doctor and staff involvement, increase patient compliance and retention and provide consistency and quality in staff explanations. Booth #116

Fused Contacts, Inc.
3939 NE 33rd Terrace
Kansas City, MO 64117
(816) 455-0500
www.bifocalcontactlenses.com

Fused Contacts offers high success, easy to fit gas permeable multifocal and bifocal contact lenses. Our fitting guides and expert consultation help you differentiate your practice. Booth #406

Hydrogel Vision Corporation
6447 Parkland Drive
Sarasota, FL 34243
(877) 336-2482
www.extreme-h2o.com

The Hydrogel Vision Corporation manufactures the Extreme H2O soft contact lens. This lens provides patients with superior visual acuity and end-of-day comfort. The Extreme H2O lens is a competitively priced two-week replacement lens that’s available only to independent eyecare practitioners. Booth #202

Innovations In Sight, Inc.
1325 Progress Drive
Front Royal, VA 22630
(877) 533-1509
www.innovationsinsight.com

Innovations In Sight uses state-of-the-art manufacturing technology to produce made-to-order, innovative designs in advanced soft and rigid gas permeable materials that provide unique solutions for complicated vision problems. Booth #115

JCAHPO
The Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO) mission is to enhance the quality and availability of ophthalmic patient care by promoting the value of qualified allied health personnel and by providing certification and continuing education. Booth #516

Lens Dynamics, Inc.
2025 Woodlane Drive
St. Paul, MN 55125
(800) 284-3937
www.lensdynamics.com

Lens Dynamics, Inc., is a specialty RGP lab that makes all designs in RGP, torics, multi-focals, and reverse geometry lenses. LD1 has the U.S. rights to the Rose K® lens for keratoconus. It also has a series of post Lasik and post graft lenses. The Dyna Intra-Limbal® design for globus and pellicid marginal degeneration is the newest design offered by LD1. Booth #301

Contact Lens and Eyecare Symposium 31
Contact Lens and Eyecare Symposium

The Purilens System from The Lifestyle Company is a simple way for contact lens patients to clean and disinfect their lenses without chemicals. Using a compact electronic unit and a preservative-free solution, Purilens provides like-new lens comfort and clarity. The Purilens System completes the major functions of contact lens care—daily cleaning and disinfection—in just 15 minutes and without rubbing. **Booth #309**

**Lippincott, Williams & Wilkins**

530 Walnut Street
Philadelphia, PA 19106

www.lww.com

Lippincott, Williams & Wilkins (LWW) is a leading international publisher of professional health information for physicians, nurses, specialized clinicians and students. LWW provides essential information for healthcare professionals in print and electronic formats. **Booth #402**

**Lobob Laboratories, Inc.**

1440 Atleberry Lane
San Jose, CA 95131-1410

(800)855-6262

www.loboblabs.com

Lobob will feature the NEW OPTIMUM by LOBOB RGP line and the newly larger sized SOF/PRO Cleaner for soft lenses plus ancillary products to make your practice more productive and rewarding with greater compliance and comfort. **Booth #408**

**Metro Optics**

PO Box 14847
Austin, TX 78626

(512) 251-2382

www.metro-optics.com

Metro Optics is a full service laboratory that manufactures GP contact lenses and also distributes soft and specialty contact lenses. **Booth #511**

**National Academy of Opticianry**

8401 Corporate Drive Suite 605
Landover, MD 20786

(301) 577-4828

www.nao.org

The National Academy of Opticianry has available for sale review books, reference books, and home study continuing education courses for opticians. **Booth #104**

**National Contact Lens Examiners (NCLE)**

6506 Loisdale Road, Suite 209
Springfield, VA 22150

703-719-5800

www.ncleabo.org

National certifying body for opticians and ophthalmic personnel fitting contact lenses. **Booth #110**

**National Keratoconus Foundation**

8733 Beverly Blvd, Suite 201
Los Angeles, CA 90048

800-521-2554

nkcf@scmc.edu

A non-profit organization with a dual mission: to support keratoconus research and to provide patient information. The NKCF provides informational materials, a newsletter and conducts educational seminars for keratoconus patients and their families. These materials are made available to eye care providers for the keratoconus patients in their practice. **Booth #108**

**Ocular Sciences, Inc.**

1855 Gateway Boulevard, Suite 700
Concord, CA 94520

(800) 628-5367

www.ocularsciences.com

As a leading manufacturer of soft contact lenses, we focus on the eyecare professional, so that your patients come back to you. Ask us about the benefits of prescribing the patient- and practitioner-preferred Biomedics® SS UV, Hydrogenics™ 60 UV, Biomedics Toric, Biomedics Colors, or the Sunsoft® Multiples® Free Plus 6™ program. **Booth #218/220**

**Paragon Vision Sciences**

947 East Impala Avenue
Mesa, AZ 85204

(800) 528-8279

www.paragonvision.com

Paragon Vision Sciences is a world leader in specialty vision care products and RGP materials. Paragon is proud to introduce Paragon CRT®, a revolutionary design and prescribing system for Corneal Refractive Therapy. Paragon’s featured materials are: Paragon HDS®, Paragon Thin™, and Paragon HDS® 100 with a 100 ISO/ANSI DK. **Booth #421**

**Precision Technology Services**

866 East Cordova Street
Vancouver, BC, V6A1M4 Canada

(800) 663-4248

www.beaok.com

PTS is the North American manufacturer and distributor for the BE Retainer Lens for Optimal Orthokeratology, as well as the North American distributor line of Medmont Topographers. PTS also is a full-service manufacturer of GP lenses and a soft lens distributor. **Booth #204**

**Progressive Vision Technologies**

11034 Shady Trail, Suite 106
Dallas, TX 75229

(800) 442-3032

www.progressiveeyes.com

Progressive Vision Technologies is a full service laboratory that manufactures GP contact lenses and also distributes soft and specialty contact lenses. **Booth #514**

**Review of Optometry**

100 Avenue of the Americas
New York, NY 10013

(212) 274-7000

www.jobson.com

Jobson Publishing is the leading publisher in the eyecare field. Titles include Review of Optometry, which has served the eyecare industry for more than 100 years, Review of Ophthalmology and Review of Contact Lenses. In addition, Jobson publishes Vision Monday and Frames Data. Jobson Research offers comprehensive and customized research and analysis of business issues affecting the optical marketplace. **Booth #201/203**

**Soderberg, Inc.**

230 Eva Street
St. Paul, MN 55107

(651) 291-1400

www.soseyes.com

Soderberg is our nation’s 4th largest non-foreign owned full service ophthalmic laboratory. Soderberg offers a full complement of products and services for all eyecare professionals. This includes: 1. Full service ophthalmic lens and frame products. 2. RGP and specialty soft lens products. 3. Preferred Select Buying Group 4. Ophthalmic Instruments 5. Safety Eyewear Program. Soderberg defines the concept of “one-stop” shopping for all your eyewear/eyecare needs. **Booth #408**

**Softchrome, Inc.**

2551 San Ramon Valley Blvd.
Suite 101
San Ramon, CA 94583

eyetint@aol.com

Softchrome is an in-office tinting system for soft contact lenses. It is patented and cleared by the FDA for marketing in the USA. **Booth #302**

**Surgical Eyes**

533 South Howard Ave, # 842
Tampa, FL 33606

(813) 254-8720

www.surgicaleyes.org

Surgical Eyes is an organization founded by people with longer-term complications from refractive surgery to assist others who have had unsuccessful LASIK, LASEK, PRK, RK, AK, ALK or other elective refractive surgeries. We help identify current remedies and spur development of future technologies to help us overcome our surgically created visual difficulties. **Booth #102**

**Tru Form Optics, Inc.**

400 South Industrial Boulevard
Suite 100
Euless, TX 76040

(800) 792-1095

www.tfoptics.com

Tru-Form Optics is a custom gas permeable lens laboratory. Our products include the Solitaire II, LLevations, Triune and Prefix II presbyopic GP lens designs. **Booth #401**
Unilens Corp., USA
10431 72nd Street
North, Largo, FL 33777
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Objectives of the CLAO Annual Meeting

The primary objective of the CLAO Annual Meeting is to provide the comprehensive ophthalmologist, the ophthalmologist-in-training, and other interested eyecare professionals, basic and clinically applicable information regarding the anterior segment of the eye, with special emphasis on contact lenses.

To this end, the scope of the CLAO Annual Meeting includes symposia and courses on contact lenses, keratorefractive surgery, optical dispensing and other science dealing with the cornea and anterior segment of the eye.

Ancillary features of the meeting include discussions concerning the impact of new technology on the eyecare practice. Practice management, as it relates to patient care, is also covered.

CLAO Election/Annual Business Meeting

Thursday, January 23, 2003
11:45am - 12:30pm

11:45am - 11:47am
Welcome
Bruce H. Koffler, MD, CLAO President

11:47am - 11:52am
2003 Educational Program Overview
George A. Stern, MD, CLAO Scientific Program Chair

11:52am - 11:57am
CLAO 2003 Election
John S. Massare, PhD, CLAO Executive Director

11:57am - 12:02pm
A Look Into The Future
Peter R. Kastl, MD, PhD, CLAO President Elect

12:02pm - 12:07pm
R. Hugh Minor Distinguished Service Award for 2003
John S. Massare, PhD, CLAO Executive Director
Peter C. Donshik, MD, Recipient

12:07pm - 12:22pm
Presentation of Awards to Recipients of 2003 Travel Grants for Young Investigators
George A. Stern, MD, CLAO Scientific Program Chair

12:22 pm - 12:28 pm
Recognition of CLAO Board of Directors Completion of Term on Board
Bruce H. Koffler, MD, CLAO President

12:28 pm - 12:30 pm
Concluding Remarks
Bruce H. Koffler, MD, CLAO President

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1977 IX G. Peter Halberg, MD
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1980 XII Oliver H. Dabezies, Jr., MD
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1983 XV Richard C. Troutman, MD
1984 XVI Joseph A. Baldone, MD
1985 XVII Perry S. Binder, MD
1986 XVIII R. Linsy Farris, MD
1987 XIX Harold A. Stein, MD, FRC(C)
1988 XX Claes H. Dohlman, MD
1989 XXI H. Dwight Cavanagh, MD, PhD
1990 XXII Louis A. Wilson, MD
1991 XXIII Michael A. Lemp, MD
1992 XXIV Peter R. Laidison, MD
1993 XXV Max H. Talbott, MD
1994 XXVI James P. McCulley, MD
1995 XXVII Ronald E., Smith, MD
1996 XXVIII Stephen D. Klyce, PhD
1997 XXIX Richard G. Lembach, MD
1998 XXXI Kim K. Caroline, FAAO
1999 XXXII Richard A. Stein, MD, FCOS-C
2000 XXXIII Jay Enoch, OD, PhD
2001 XXXIV Richard A. Stein, MD
2002 XXXV Peter R. Laidison, MD

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1975 Paul Cochet, MD
1976 John F. Morgan, MD
1979 Jose I. Barraquer, MD
1980 Michael Roper-Hall, FRCS
1981 Thomas F. Spring, MD
1982 H. Jonathan Kersley, FRCS
1984 Ian Mackie, FRCS
1985 Danie A. Aron-Rosa, MD
1986 Brian A. Holden, OD, PhD
1987 Christiane Mareschal-Courtois, MD
1988 Akira Nakajima, MD
1989 Peter Watson, FRCS
1990 Hans Walter-Roth, MD
1991 Roger J. Buckley, FRCS
1992 Dan Epstein, MD, PhD
1993 John G. Dart, FRCS
1994 Hiroshi Hamano, MD
1995 Yves J. M. Pouliquen, MD

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1981 Max H. Talbott, MD
1982 Hon. Albert Gore
1984 Whitney G. Sampson, MD
1985 Hon. W. Henson Moore
1986 Sanford A. Marcus
1989 James Sammons, MD
1991 C. John Tupper, MD
1994 William A. Maxwell, MD, PhD
1995 Senator Harry Reid
1997 Richard L. Lindstrom, MD (Surgical)
2000 John F. Deering, MD

Everett Kinsey Lecturers
1987 Carl Rupfer, MD
1989 Henry Edelhauser, PhD
1990 Stephen D. Klyce, PhD
1991 Jay Enoch, OD, PhD
1992 Robert Mandell, OD, PhD
1993 J. W. Costerton, PhD
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1995 Roger Beuerman, PhD
1996 Edwin M. Stone, MD, PhD
1997 Gregory S. Schultz, PhD
2000 Jean-Marie Parel, PhD

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2001 William M. Bourne, MD
2002 Peter C. Donshik, MD

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2001 Sven Erik G. Nilsson, MD, PhD
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Contact Lens and Eyecare Symposium 35
CLAO Annual Meeting
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Bruce I. Bodner, MD, Norfolk, VA
Herschell H. Boyd, MD, London, England
Michael D. Brown, Indianapolis, IN
Jorge N. Buxton, MD, New York, NY (d)
Kurt A. Buzzard, MD, Las Vegas, NV
Herve M. Byron, MD, Englewood, NJ
Delmar R. Caldwell, MD, New Orleans, LA
Robert C. Campbell, MD, Minnetonka, MN
H Dwight Cavanagh, MD, PhD, Dallas, TX
J Dean Clements, Galena, OH
Robert J. Crossen, MD, Wilmington, VA
Robert A D’Amico, MD, New York, NY
Peter C. Donshik, MD, W Hartford, CT
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Sami G. El Hage, OD, Dsc, PhD, Houston, TX
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Michael A. Ward, FCLSA (H) Atlanta, GA
Louis A. Wilson, MD, Atlanta, GA (d)
Lawrence A. Winograd, MD, Denver, CO
Poster 1

United States Multicenter Trial on Conductive Keratoplasty (CK) for Correcting Spherical Hyperopia: Results of Two-Year Follow-Up

Penny A. Ashell, MD; Marguerite McDonald, MD; Peter Hersh, MD; Jonathan Davidoff, MD; Robert Maloney, MD; Edward Manche, MD

Purpose: To determine the safety, efficiency, and stability results of CK used to treat a cohort of eyes with low to moderate spherical hyperopia. Methods: Conductive keratoplasty is a technique that delivers radio frequency current directly into the corneal stroma to shrink collagen and decrease hyperopia. A total of 253 patients (400 eyes) with a mean preoperative MRSE of +1.82 ±0.60 D and mean age of 55 ±5.4 years underwent CK treatment.

Results: At one-year (N=354) and two years (N=124), respectively, 54% and 51% had post-operative UCVA 20/20 or better; 74% and 77% had 20/25 or better; and 92% and 91% had 20/40 or better. At one and two years, respectively, the MRSE was within 0.26 D between three and six months, 0.10D in 88% and 84%. The mean change in MRSE refraction was 0.26 D between 12 and 24 months. Two lines of BSCVA were lost in 9/391 (2%) at 12 months and in 1% at 24 months. No eye lost more than 2 lines.

Conclusion: Results beyond one-year data show excellent efficiency, safety, and stability of conductive keratoplasty in the treatment of spherical hyperopia. Although data at two years are limited, the results thus far parallel the one-year results.

Poster 2

A Comparison of Treatments for Lysozyme Removal from High Water Ionic Contact Lenses

A. Mike Christensen, OD

Purpose: To compare treatments for removing lysozyme from contact lenses. Methods: Contact lenses were collected after seven days DW/OS lenses were assigned to one of the following: TxA - Rub/Rinse with phosphonate based MPS, TxB-No-Rub/Rinse with citrate based MPS and TxC-No-Rub/Rinse with citrate based MPS. Results: TxA OS lenses showed lysozyme levels of ~760ug and TxC lenses showed lysozyme levels of ~740ug. Conclusion: Reducing the rinse step did not significantly reduce cleaning between TxB&C. Both B&C removed more lysozyme than TxA

Poster 3

Innovative Evaluation System for Epithelial Ingrowth in LASIK

Arun Gulani, MD

Purpose: To introduce a new system for evaluating epithelial ingrowth in Laser Assisted In-Situ Keratomileusis (LASIK).

Methods: Retro-Illumination technique was used to evaluate epithelial ingrowth and three levels of progression have been proposed.

Results: This new protocol aided in the early detection and provided a new dimension to judge the density towards progressive criteria or clinical significance.

Conclusions: The proposed density grading system allows for documenting quantitative progression of epithelial ingrowth, thus providing timely intervention towards effective management.

Poster 4

Dry Eye Matrix in Refractive Surgery

Arun Gulani, MD

Purpose: To introduce conceptual clinical guidelines in diagnosing, managing and effectively treating dry eye symptoms in refractive surgery patients.

Methods: Subjective symptomatology was combined with objective questions to make a preliminary diagnosis after which a three-tiered diagnostic pyramid was applied to make an accurate diagnosis of dry eye.

Results: Patients presenting with dry eye symptomology were delineated into simulating conditions and primary causes which were then effectively treated to alleviate dry eye complaints.

Conclusions: The dry eye matrix helped simplify the maze of presenting dry eye complaints and lead to an accurate diagnosis which was then effectively treated to successfully alleviate the presenting symptomatology resulting in happy refractive patients.

Poster 5

New Illumination System to Delineate Corneal Scars for Effective Lamellar Surgery

Arun Gulani, MD

Purpose: To evaluate corneal scars at the lamellar levels for effective management.

Methods: Additional illumination was attached to existing slit lamp systems to delineate corneal pathology at accurate corneal depth and configuration.

Results: The accurate corneal depth involvement extent allowed for effective lamellar surgical management for individual cases.

Conclusions: Revision PRK. Automated Homoplastic Keratoplasty and Hand Lamellar Keratoplasty were planned to effectively alleviate surface irregularity and/or structural integrity in individual cases.

Poster 6

Close Circuit TV/Opening the Circuit

Joseph Hallak, OD, PhD

Low vision rehabilitation consists of image magnification commonly. This is achieved using stand-alone optical devices or opto-electronic devices. In this latter the optical image is captured by a camera, transduced and projected on a TV like screen, hence the name Close Circuit TV. The major advantage of such systems is the ability to offer limitless magnification, to change the illumination, contacts and polarity, all at the touch of a button or via voice command. Up until a few years ago, the CCTVs were stationary and limited to near tasks. New advances in technology allow them to be used for distance vision as well as to interface with computers. Freedom of ambulation with these devices is on the drawing board thanks to new technologies. At the same time, nascent surgical techniques to implant various circuits seem to hold exciting promises for the future.

Poster 7

Macrolens Evaluation on Post Penetrating Keratoplasty Patients

Bruce H. Koffler, MD; Vivian Smith, OD; Gil Litteral

Purpose: The Macrolens from C&H Labs was fit on post penetrating keratoplasty (PKP) patients to evaluate the lens performance on these compromised corneas.

Methods: Twenty-seven lenses were dispensed to 24 patients who had PKP (1964 to 12/97). Patients were followed for six months.

Results: Twelve of 27 continue wearing or completed six months wear of the Macrolens without adverse effect to the graft.

Conclusion: The Macrolens is a comfortable lens for grafted patients to wear; however, close attention to the bearing relationship on the grafted corneas is imperative to prevent adverse outcomes on these already surgically altered eyes.

Poster Authors Q&A

Each poster author will be available at their poster to answer questions from attendees for a half-hour period on Friday and Saturday between 11:30am and 2:30pm. Refer to the upper right hand corner of the poster for the specific time the author will be present.
Poster 8
Evaluation of Corneal Staining and Patient Preference with Use of Three Multi-Purpose Solutions and Two Brands of Soft Contact Lenses
Kenneth A. Lebow, OD, FAAO; John Schachet, OD
Two studies evaluated differences in corneal staining and patient preference associated with Ny RuB(TM) Opti-Free(R) Express(R) Multi-Purpose Disinfecting Solution (OFX MPDS), ReNu Multiplus(R) and Complete(R) MPS used with Acuvue(R) 2 and SofLens(TM) 66 lenses. Corneal staining was significantly worse with ReNu MultiPlus at the end of the wearing period (DAY 28) compared to baseline. Significant differences in staining were noted between OFX MPDS and ReNu MultiPlus throughout the study, primarily with SofLens 66 lenses. No consistent changes in staining were noted with OFX MPDS or Complete. Subjects preferred the comfort of OFX MPDS compared to ReNu MultiPlus.

Poster 9
Discoloration of Contact Lens by Eyeliner
Etichi Okada MD; Nobuyuki Miyata, MD; Masao Yoshida, MD; Kunhiro Mizoguchi, MD; Yutaka Takashima MD, PhD; Kenji Okuda, MD, PhD; Nobuhsa Mizuki, MD, PhD
Two Precision UV (CIBA Vision) users claimed that their contact lenses discolored after changing their eyeliner brands. An experiment was conducted to test whether eyeliners could cause contact lenses to discolor. Twenty brands, both domestic and foreign, were used. There are three main types of eyeliner: pencil, liquid and brush. One of the brush types was found to contain a pigment, Acid Red 18, with a molecular weight of 604. It was discovered that contact lenses could be discolored by this pigment.

Poster 10
Corneal Refractive Therapy (CRT) Lens Applications
Viven M. Smith, OD
The recently approved Paragon CRT lens for overnight wear for correction of myopia of this application.
**Poster 15**

Flap Folds after Femtosecond LASIK

Adam H. Bloom, MD; Seth Biser, MD; Henry Perry, MD; Eric Donnenfeld, MD; Sima Doshi, MD

**Purpose:** To report a case of bilateral flap folds following a LASIK procedure performed with the femtosecond laser.

**Methods:** Retrospective chart review. In March 2002, a 43-year-old female underwent bilateral simultaneous LASIK with the femtosecond laser. The laser was set to create 130 micron flaps with a superior hinge, and the correction was -7.00 OD, -7.00 OS. Contact lenses were placed at the conclusion of the procedure, and were removed two days postoperatively. Following their removal, the patient noted significant visual disability owing to glare and haloes. She was diagnosed with microstriae. In May 2002, she referred herself for consultation. On examination, marked vertical flap folds were noted OU. The folds persisted despite lifting and stretching procedures, and subsequently flap suturing was performed.

**Results:** Following flap suturing, the visual disabling symptoms resolved, and the patient recovered useful vision.

**Conclusion:** Despite the increased accuracy in flap creation with the femtosecond laser, large flap folds can develop. Appropriate caution should be taken in the postoperative management of patients undergoing LASIK with the femtosecond laser.

**Poster 16**

Optical Considerations of Highly Myopic Soft Toric Lenses

Claiborne H. Callahan, MD; Peter R. Kastl, MD, PhD

Highly myopic astigmatic spectacle refractions call for proper vertex distance correction when reduced to soft toric contact lens prescriptions. Spherocylindrical notation must be converted to a power cross, and each component adjusted for vertex distance as shown in this example: spectacle refraction was -12.50-2.00x180, producing a power cross of -12.50/-15.00. After vertex distance correction (13mm), the power cross became -10.75/-12.50, yielding this final prescription: -10.75 -1.75 x 180.

**Poster 17**

Bilateral Corneal Anesthesia, Associated with Diaphragmatic Paralysis Primary Ocular Failure, and Mental Retardation

Clement J. Cheng, MD; Susan Stenson, MD

A 38-year-old Hispanic female presented with bilateral spontaneous neurotrophic keratopathy. There was denudation of the inferior two-thirds of the corneal surface, absent corneal sensation, decreased visual acuity to 20/200, and no associated pain. Fundus examination revealed bilateral diffuse areas of retinal hemorrhage. There was no trauma history. Drugs abuse by history and toxicology were negative. The corneal defects eventually healed in with daily patching. Medical findings included diaphragmatic paralysis, primary ocular failure, multiple thrombotic CVA's pedal edema, mandibular hypoplasia, and mental retardation. Consanguineous parents and a sibling with similar findings suggest an inherited syndrome. Genetic workup will be discussed.

**Poster 18**

Bilateral Keratoconus After LASIK in Keratoconus Suspect

Robert K. Chiung, MD; Christopher Rapuano, MD; Elizabeth Cohen, MD

**Purpose:** To describe a case of bilateral keratoconus after LASIK in a keratoconus suspect.

**Method:** Case report. **Results:** A 33-year-old male presented to our institution for evaluation of poor vision four years after bilateral LASIK for compound myopic astigmatism. Corneal topography showed marked bilateral inferior steepening, and slit lamp exam revealed classic signs of keratoconus. A review of pre-operative corneal topography showed bilateral inferior steepening, but no other clinical signs of keratoconus were present at the time of operation.

**Conclusion:** Inferior steepening on corneal topography should be regarded as a contraindication to the LASIK procedure.

**Poster 19**

An Unusual Case of Irregular Astigmatism Secondary to Retained Intracorneal Glass

Leslie N. Estrada, MD; Carol E. Rosenstiel, OD

Accidents involving glass have generated several reports of intracorneal and intraocular glass foreign bodies. Glass is generally considered inert, but it may cause corneal pathology from scar formation or from corneal edema related to mechanical irritation of the endothelium. We report an unusual case of irregular astigmatism secondary to retained intracorneal glass s/p MVA. Initially, a rigid gas permeable lens was necessary to achieve a best corrected visual acuity of 20/25 +3. Almost two years later, the patient returned having self discontinued the lens secondary to spontaneous extrusion of the glass particles and near total resolution of the irregular astigmatism.

*Young Investigator’s Travel Grant Award Recipient*
Poster 22

Optical Wavefront Analysis of Unrestricted Vs. Contact Lens-Corrected Vision

James A. McHale, MD*; Richard G. Lembach, MD; Cynthia Roberts, PhD

Purpose: To test the feasibility of Zywave aberrometer to evaluate eyes with myopic-astigmatism, keratoconus, or penetrating keratoplasty and evaluate the effect of rigid gas-permeable contact lenses (RGPs) on the analysis.

Methods: Wavefront analysis was performed on 16 subject eyes and was then repeated with the subject's RGPs. Results: 3 to 6 eyes with keratoconus and 1 of 2 eyes post-penetrating keratoplasty could be analyzed successfully. Wavefront analysis was performed on all 16 eyes with RGP correction.

Conclusion: Significant corneal surface irregularities can overwhelm the Zywave aberrometer and prevent extraction of higher-order aberrations in these patients. Correcting surface irregularities with RGPs enabled successful analysis.

Poster 23

Reproducibility and Agreement of Cahper, Ultrasound Orbscan

Satya V. Reddy, MD*; Ying Huang, MD; Robin Cooper, COM; Christine Romero, MD

Purpose: To determine reproducibility and agreement of methods for anterior chamber (AC) measurement. Angel support of phakic intraocular lens (IOLs) for refractive corrections is associated with pupillary oaling and iris vessel infraction attributed to haptic pressure on the iris root. Precise AC diameter measurement and correct lens sizing might greatly reduce problems with phakic AC IOLs.

Methods: One eye in 7 normal subjects was measured by caliper, ultrasound, or Orbscan. Each method was applied by two advanced ophthalmology residents and two senior analysis of bias were conducted.

Poster 24

Do the Economic and Social Factors Play an Important Role in Relation to the Compliance of Contact Lenses Care Routines

Marcelo Vincente de Andrade Sobrinho, MD*; Regane Aires, MD

Purpose: To evaluate the behavior of the contact lens wearers in distinct economic/social groups in relation to their contact lens care routines.

Methods: We studied 60 patients of distinct social groups at the same contact lenses department. We divided them as it follows: GROUP 1: 31 patients who could not pay for medical assistance, and were in the Government Health Assistance Program; GROUP 2: 29 patients that had health insurance and/or could pay for the assistance. We studied their age, time of contact lens use, type of contact lens used and related these variables to the contact lens care routines.

Results: There was no significant difference between the two groups in relation to the contact lens care routines.

Conclusion: Social factors do not seem to be the most important factor in relation to the compliance of contact lens care routines.

Poster 25

Methicillin-Resistant Staphylococcus Aureus Infectious Keratitis Following Refractive Surgery

Renée Solomon, MD*; Eric Dorrngfeld, MD; Michael Ehrenhaus, MD; Henry Perry, MD; Seth Biser, MD

Purpose: To describe risk factors, treatment, and visual outcomes of methicillin resistant staphylococcus aureus (MRSA) infectious keratitis following refractive surgery. Methods: Retrospective chart review.

Results: Seven eyes of six patients developed MRSA infections following LASIK or PRK. All patients had a recent history of exposure to a hospital environment. All patients responded to topical vancomycin. Best corrected visual acuity ranged from 20/200.

Conclusion: MRSA infectious keratitis is a rare but potentially serious corneal infection following refractive surgery and is associated with occupational or surgical exposure to a hospital environment.

Poster 26

Superior Limbic Keratoconjunctivitis Following Penetrating Keratoplasty

Christine E. Speer, MD*; Irving Rabin, MD

Purpose: We describe two patients who developed new-onset superior limbic keratoconjunctivitis following penetrating keratoplasty.

Methods: Two case reports are presented.

Results: Two patients are described who required penetrating keratoplasty. One patient underwent bilateral penetrating keratoplasty for keratoconus and subsequently developed bilateral superior limbic keratoconjunctivitis. Another patient with scarring from herpes simplex keratitis underwent unilateral penetrating keratoplasty and post-operatively developed superior limbic keratoconjunctivitis.

Conclusion: Superior limbic keratoconjunctivitis may occur following penetrating keratoplasty in patients with no previous clinical findings of this disease.

Poster 27

Keratoconus in a 17-Year-Old Female with Larsen Syndrome

Primary Author: Sara E. Lally, MD*; Co-Author: Arunaagiri Guruswami, MD

Abstract: A 17-year-old female with Larsen Syndrome presented to Geisinger Medical Center Emergency Clinic with severe eye pain OD. On examination, she was noted to have keratoconus with acute hydrops. She subsequently underwent a PKP two months later. Larsen Syndrome is an autosomal dominant disorder in which affected individuals show multiple joint dislocations, flat facies, and short fingernails. It is occasionally associated with entropion of lower eyelids and anterior cortical lens opacities. There are no reported cases of the association of Larsen Syndrome and keratoconus.
THURSDAY, January 23, 2003

9:30am - 11:45am
Dry Eye Symposium
Including the Harold A. Stein, MD, Lecture
Monterey 1
23-101A, 23-201B
Lectureship by Frank Holly, PhD
David W. Lamberts, MD, Moderator
Level II, For: MD, OD, technician
Prerequisites: The participant should have
basic understanding of the physiology of the
tear film and tear film function.
Objectives: After attending this symposium the
participant should be able to:
1. Compare and contrast potential
   treatments for dry eye;
2. Discuss the historical developments in
   the treatment of dry eye and what the
   approaches are today;
3. Understand the latest knowledge on the
   physiology of the pre-ocular tear film.
This symposium offers an in-depth look at the
topic along with the most up-to-date theo-
ries and available treatments. This symposium
includes the Harold A. Stein, MD, Lecture. This
special presentation covers what is presently
known about the pre-ocular tear film and its
critical importance in the successful wear of
contact lenses and eye health in general.

9:45am - 10:00am
New Secretagogues in Treating Dry Eyes
Gary N. Foulks, MD

10:00am - 10:03am
Introduction of Harold A.
Stein, MD, Lecturer
David Lamberts, MD

10:03am - 10:28am
The Harold Stein, MD, Lectureship: The
Mysteries of the Pre-Ocular Tear Film
Frank Holly, PhD

10:28am - 10:30am
Presentation of Harold A. Stein, MD,
Lectureship Award
David Lamberts, MD

10:30am - 10:45am
Androgens: A New Approach
for Dry Eyes
H. Dwight Caravagh, MD, PhD

10:45am - 11:00am
Contact Lens Fitting in Dry Eye
Patients: Clinical Pearls
Greg Gemoules, OD

11:00am - 11:15am
Cyclosporine: Does It Work?
Gary Foulks, MD

11:15am - 11:45am
Audience Q&A: Speaker Panel

1:00pm - 3:15pm
Getting Started in Optical Dispensing Symposium
Coronado P, Q
23-301A, 23-401B
Joseph L. Bacotti, MD, Moderator
Level I, For: MD, OD, optician, administrator
Prerequisites: None
Objectives: After attending this symposium the
participant should be able to:
1. Describe how to plan your frame inventory;
2. Evaluate whether to establish an optical
   dispensary in the ophthalmic practice;
3. Enumerate what to look for in vendors and
   their impact on a successful practice.
The decision for an ophthalmic practice to
become involved with the dispensing of eye-
glasses is covered in depth. Planning space for
an optical dispensary is presented along with
capital budget planning and frame inventory
planning. Determining which optical lab and
other vendors to work with, and how best to
work with them is also covered. At the conclu-
sion of this symposium the professional
should have beginning knowledge on getting
starting in optical dispensing and what this
will mean to the ophthalmic practice.

1:00pm - 1:12pm
Should I Start Dispensing?
George A. Stern, MD, MBA

1:12pm - 1:24pm
Planning the Optical Dispensary Space
Joseph L. Bacotti, MD

1:24pm - 1:36pm
Capital Budgeting: Will This Really Be a
Profit Center?
George A. Stern, MD, MBA

1:36pm - 1:48pm
Planning the Frame Inventory
Arthur DeGennaro

1:48pm - 2:00pm
Choosing and Working with a Lab
Joseph L. Bacotti, MD

2:02pm - 2:15pm
Break

2:15pm - 2:27pm
Staffing Your Dispensary: What to
Look for in Opticians
Raymond Dennis

2:27pm - 2:39pm
Working with Vendors
Joseph L. Bacotti, MD

2:39pm - 2:51pm
Does Quality Limit Profit?
Arthur DeGennaro

2:51pm - 3:15pm
Audience Q&A

1:00pm - 2:00pm
Contact Lenses in the Corneal Surgery
Patient Symposium
Coronado F, G
23-302
Bruce H. Koffler, MD, Moderator
Level II, For: MD, OD, technician
Prerequisites: A knowledge of contact lens
fitting, basic understanding of corneal surgery
and corneal physiology.
Objectives: After attending this symposium the
participant should be able to:
1. Describe the refractive surgery complica-
tions that require the correction of contact
lenses;
2. Evaluate therapeutic lens use following
corneal surgery practice;
3. Enumerate different fitting approaches to
   the abnormal cornea.
Abnormal corneal topography after corneal
transplant, corneal trauma, and post-refractive
surgery changes may call for the utilization of
contact lenses. Many types of corneal surgery
may require a contact lens fitting to be done
after the surgery is completed and the patient
stabilized. This symposium discusses many of
the uses for contact lenses after corneal sur-
gery, including post-refractive surgery.

1:00pm - 1:10pm
Fitting Approaches to the
Abnormal Cornea
Patrick Caroline, FCLSA, FAAO

1:10pm - 1:20pm
Cosmetic Contact Lenses After
Corneal Trauma
Richard Shugarman, MD

1:20pm - 1:30pm
Fitting the Post-Corneal
Transplant Patient
Michael Ward, MMSc, FCLSA

1:30pm - 1:40pm
Fitting the Post-Refractive
Surgery Patient
Bruce Koffler, MD

1:40pm - 1:50pm
Therapeutic Lens Use Following
Corneal Surgery
Gary Foulks, MD

1:50pm - 2:00pm
Audience Q&A
Speaker Panel

1:00pm - 1:10pm
Fitting Approaches to the
Abnormal Cornea
Patrick Caroline, FCLSA, FAAO

1:10pm - 1:20pm
Cosmetic Contact Lenses After
Corneal Trauma
Richard Shugarman, MD

1:20pm - 1:30pm
Fitting the Post-Corneal
Transplant Patient
Michael Ward, MMSc, FCLSA

1:30pm - 1:40pm
Fitting the Post-Refractive
Surgery Patient
Bruce Koffler, MD

1:40pm - 1:50pm
Therapeutic Lens Use Following
Corneal Surgery
Gary Foulks, MD

1:50pm - 2:00pm
Audience Q&A
Speaker Panel
1:00pm - 2:00pm

**SOBLEC Symposium**
Coronado C
23-303
Hamilton Moreira, MD, Moderator

Level II, For: All eyecare professionals

Prerequisites: The participant should be familiar with basic ocular terminology and physiology. Basic contact lens fitting knowledge is needed.

Objectives: After attending this symposium the participant should be able to:
1. Describe some ocular surface disorders resulting from contact lens wear;
2. Discuss complications of extended wear contact lenses;
3. Understand contact lenses from a Brazilian perspective.

The Brazilian Ophthalmological Society of Contact Lenses and Cornea (SOBLEC) was invited to put on this special International Symposium. Well-known ophthalmologists from Brazil will present various scientific papers. Topics include complications of extended wear lenses, contact lens fitting after penetrating keratoplasty, hybrid contact lenses, and ocular surface disorders.

1:00pm-1:12pm
**Contact Lens Fitting After Penetrating Keratoplasty**
César Lipener, MD

1:13pm-1:25pm
**Complications of Extended Wear Contact Lenses**
Paulo Ricardo de Oliveiria, MD

1:26pm-1:38pm
**Hybrid Contact Lenses**
Orestes Miraglia, MD

1:39pm - 1:51pm
**Ocular Surface Disorders and Contact Lenses**
Adamo Lui Neto, MD

1:56pm-2:00pm
**Audience Q&A, Speaker Panel**

2:15pm – 3:15pm

**Therapeutic Contact Lenses Symposium**
Coronado F, G
23-402
William Ehlers, MD, Moderator

Level II, For: MD, OD, technician

Prerequisites: The participant should be familiar with basic understanding of therapeutic contact lenses and their use in the ophthalmic practice.

Objectives: After attending this symposium the participant should be able to:
1. Describe uses for therapeutic contact lenses in corneal and conjunctival disease;
2. Discuss the use of therapeutic lenses for ocular trauma;
3. Enumerate complications from the use of therapeutic contact lenses.

Therapeutic contact lenses and their various uses in treating ocular conditions are discussed in this symposium. Therapeutic contact lenses for corneal and conjunctival disease and for ocular trauma are also covered, along with complications from the use of therapeutic lenses and the management of patients in such cases.

2:15pm - 2:20pm
**Introduction**
William Ehlers, MD

2:25pm - 2:40pm
**Therapeutic Lenses for Corneal and Conjunctival Disease**
Gary Foulks, MD

2:40pm - 2:55pm
**Therapeutic Lenses for Ocular Trauma and Specialty Lenses**
Peter Donshik, MD

2:55pm - 1:10pm
**Complications of Therapeutic Lenses and Patient Management**
Jeanine Suchecki, MD

3:10pm - 3:15pm
**Q&A, Speaker Panel**

2:15pm - 3:15pm

**The Best of CLAO Research Symposium – Anterior Segment**
Coronado R, S
23-403
Peter R. Kastl, MD, PhD, Moderator

Level II, For: MD, OD, technician

Prerequisites: The participant should be familiar with basic ocular terminology.

Objectives: After attending this symposium the participant should be able to:
1. Describe a typical peripheral sub-epithelial scarring;
2. Discuss the results of a multicenter trial on conductive keratoplasty for correcting spherical hyperopia;
3. Compare and contract measurement techniques for anterior chamber width.

This symposium consists of chosen poster submissions whose authors present their work in a symposium format, in addition to the poster presentation at the 2003 CLAO Annual Meeting at CLES. This eclectic symposium covers measurement of anterior chamber width, recent results of a US multicenter trial on conductive keratoplasty for correcting spherical hyperopia, peripheral subepithelial scarring and infectious keratitis following refractive surgery.

2:15pm - 2:25pm
**MRSA Infectious Keratitis Following Refractive Surgery**
Renee Solomon, MD

2:25pm - 2:27pm
**Audience Q&A**

2:27pm - 2:37pm
**US Multicenter Trial on Conductive Keratoplasty for Correcting Spherical Hyperopia: Recent Results of Two Year Follow-up**
Penny Asbell, MD

2:37pm - 2:39pm
**Audience Q&A**

2:39pm - 2:49pm
**Atypical Peripheral Sub-Epithelial Scarring**
Heather A. Maust, MD

2:49pm - 2:51pm
**Audience Q&A**

2:51pm - 3:01pm
**Summary of US Results of the Treatment of Presbyopia with Conductive Keratoplasty**
Shamim Haji, MD

3:01pm - 3:03pm
**Audience Q&A**

3:03pm - 3:13pm
**Reproducibility and Agreement of Caliper, Ultrasound, and Orbscan Measurement of Anterior Chamber Width**
Satya.V. Reddy, MD

3:13pm - 3:15pm
**Audience Q&A**
FRIDAY, January 24, 2003
7:45am - 8:45am
ECLSO/H. Jonathan Kersley, MD
Symposium on Hydrogel Contact Lenses for Therapeutic Use and Microscopic Changes Detected by Confocal Microscopy
Coronado F, G
24-101
Jane Sparholt, MD, Moderator
Level II, For: All eye care professionals
Prerequisites: The participant should be familiar with contact lens materials.
Objectives: After attending this symposium the participant should be able to:
1. Describe therapeutic uses of silicone hydrogel lenses;
2. Discuss corneal changes resulting from 30-night wear of high-Dk silicone lenses;
3. Understand basic uses for the confocal microscope in evaluating the human cornea.
The European Contact Lens Society of Ophthalmologists (ECLSO) was invited to put on this special International Symposium. Four well-known ophthalmologists from Europe will present papers on the therapeutic use of silicone hydrogel contact lenses and present data on cellular changes after contact lens wear utilizing confocal microscopy.

2:30pm - 4:45pm
The Problem Contact Lens Patient Symposium including the Oliver H. Dabezies, Jr., MD, Lectureship by James E. Key, II, MD
Coronado F, G
24-201A, 24-301B
William T. Driebe, Jr., MD, Moderator
Level II, For: MD, OD, technician
Prerequisites: The participant should have basic knowledge of anterior segment anatomy and pathology, and contact lens fitting
Objectives: After attending this symposium the participant should be able to:
1. Understand the diagnosis and management of contact lens related ulcerative keratitis;
2. Understand the current management of CLPC, dry eyes, blepharitis and solution problems in the contact lens patient;
3. Understand the current management of presbyopia with contact lenses;
4. Identify future options for the management of presbyopia.
This symposium is designed to provide the participant with the latest information regarding managing the problem contact lens patient. Keratitis, CLPC, KCS, Blepharitis, Solution Problems, Post-Refractive Surgery Fitting, and Presbyopia Management are addressed. The highlight of this two-hour symposium is the Oliver H. Dabezies, Jr., MD, Lecture. This presentation covers the various ways to meet the challenge of fitting contact lenses for a patient with presbyopia.

5:00pm - 6:00pm
Glaucoma Symptoms – 2003 Update on Medical Treatment Symposium
Monterrey T
24-401
Mary Fran Smith, MD, Moderator
Level II, For: MD, OD, technician
Prerequisites: A basic knowledge of the condition of glaucoma, and familiarity with ocular anatomy and physiology.
Objectives: After attending this symposium the participant should be able to:
1. Describe the use of hypotensive lipids in the treatment of glaucoma;
2. Discuss how aqueous suppressants are used in the treatment of glaucoma;
3. Identify future options for the management of glaucoma.
This symposium provides an update discussion on the medical treatment options for glaucoma. The use of hypotensive lipids, combination drops, and aqueous suppressants are covered. The value of alpha agonists and neuroprotection also are discussed, as are future treatment options for glaucoma.

5:12pm - 5:24pm
Alpha Agonists and Neuroprotection
J. William Doyle, MD, PhD

5:24pm - 5:36pm
Aqueous Suppressants
Mary Fran Smith, MD

5:36pm - 5:48pm
Combination Drops and Future Options for Treatment
J. William Doyle, MD, PhD

5:48pm - 6:00pm
Audience Q&A, Speaker Panel
Japanese Contact Lens Society Symposium
Coronado D
24-404
Atsushi Kanai, MD, Moderator
Level II, For: All eyecare professionals
Prerequisites: The participant should be familiar with basic ocular terminology and physiology. Basic contact lens fitting knowledge is needed.
Objectives: After attending this symposium the participant should be able to:
1. Describe some of the contact lens complications found through a joint survey in Japan;
2. Discuss the clinical evaluation of short wavelength blocking contact lenses for a patient with pigmentary retinal dystrophy;
3. Understand the trends of contact lens usage in a country other than the United States.
The Japan Contact Lens Society (JCLS) was invited to put on this special International Symposium. Well-known ophthalmologists from Japan present scientific papers ranging from contact lens research in Japan to hyperopia after refractive surgery. Application of a piggyback contact lens system for dry eyes and the clinical evaluation of short wavelength blocking contact lenses for a patient with pigmentary retinal dystrophy is also discussed.

5:00pm - 6:00pm
Trends of Contact Lenses in Japan
Atsushi Kanai, MD; JCLS President

5:10 pm - 5:20 pm
A Clinical Survey of Contact Lens Complications in Japan: A Joint Study by the JCLS, Japan Medical Association, and Japan Contact Lens Association
Motozumi Ito, MD; Kichi Ueda, MD; Kenji Okano, MD; Yoshikazu Utsumi, MD; and Hiroshi Yoshida, MD

5:20 pm - 5:30 pm
Three Aesthenopic Cases Due to Hyperopia After Refractive Surgery and Their Management/Treatment by Glasses and/or Contact Lenses
Masayoshi Kagitata, MD

5:30 pm - 5:40 pm
Clinical Evaluation of Short Wavelength Blocking Contact Lenses for a Patient with Pigmentary Retinal Dystrophy
Hiroyuki Fujita, MD; Kenji Sano, MD; Shyji Sasuki, MD; and Manabu Mochizuki, MD

5:40 pm - 5:50 pm
Applications of a Piggyback Lens System for Dry Eyes
Kenji Sano, MD

5:50 pm - 6:00 pm
Questions for Speaker Panel

SATURDAY, January 25, 2003
8:00 am - 9:00 am
Keratoconus Symposium
Fiesta 5
25-101
Henry Perry, MD, Moderator
Level II, For: OD, MD, technician
Prerequisites: A basic knowledge of the condition keratoconus, corneal surgery and corneal physiology
Objectives: After attending this symposium the participant should be able to:
1. Describe when corneal transplantation is indicated for keratoconus;
2. Discuss how Intacs may be utilized in the treatment of keratoconus;
3. Identify the management techniques for keratoconic post-keratoplasty astigmatism.

8:00 am - 8:12 am
When Is Corneal Transplantation Indicated for Keratoconus?
George A. Stern, MD

8:12 am - 8:24 am
Intacs for Keratoconus
Penny Asbell, MD

8:24 am - 8:36 am
Management of Keratoconus Post-Keratoplasty Astigmatism: Relaxing Incisions and Compression Sutures
David Meisler, MD

8:36 am - 8:48 am
Management of Keratoconus Post-Keratoplasty Astigmatism: LASIK vs. PRK
Henry Perry, MD

8:48 am - 9:00 am
Audience Q&A, Speaker Panel

8:00 am - 9:00 am
Running A Profitable Contact Lens Practice Symposium
Coronado E
25-104
Joseph L. Bacotti, MD, Moderator
Level I, For: All eyecare professionals
Prerequisites: None
Objectives: After attending this symposium the participant should be able to:
1. Describe contact lens practice management concerns and strategies;
2. Evaluate the significance of contact lenses to a comprehensive practice;
3. Enumerate the differences between a solo comprehensive practice compared to a comprehensive large group practice.

Today, in order to service a community, a contact lens service is required by many vision plan contacts in order to attract large groups of patients. Also today, patients and their family are exposed to all the newest contact lenses as an alternative to eyeglasses and refractive surgery for social, sport, and occupational needs. However, whether a contact lens service is within a small practice, multiple doctors or multiple office locations, it must be operated profitably and provide a true service to patients. Lenses must all be offered for cosmetic daily or extended wear, astigmatism, bifocal, irregular cornea, keratoconus, and post refractive surgery in order to offer the patient the best functional visual acuity. This symposium covers facility, personnel, advertising, management protocol, order and reorder policies, patient information, patient training and other practice aspects. The specific needs of a solo practitioner, as well as those of a group practice, are discussed. Also, special concerns of a practice with multiple locations are considered.

9:30 am - 9:35 am
Introduction and Overview
Joseph L. Bacotti, MD

9:35 am - 9:50 am
The Solo Comprehensive Doctor with Limited Contact Lens Services
Joseph L. Bacotti, MD

9:50 am - 10:05 am
A Large Group Practice with Total Contact Lens Services
Craig Norman, CO, FCLSA

10:05 am - 10:20 am
A Group Practice with Multiple Offices and Total Contact Lens Services
James E. Key, II, MD

10:20 am - 10:30 am
Audience Q&A
8:00am - 9:00am
The Best of CLAO Research Symposium – Optics and Contact Lenses
Coronado B
25-102
Zoraida Fiol-Silva, MD, Moderator
Level II, For: All eyecare professionals
Prerequisites: The participant should be familiar with basic contact lens terminology.
Objectives: After attending this symposium the participant should be able to:
1. Describe what economic and social factors impact patient compliance with their contact lens care routines;
2. Discuss an effect of GP lenses on anisometric amblyopia;
3. Compare treatments for lysozyme removal on high water ionic contact lenses.
This symposium consists of chosen poster submissions, whose authors present their work in a symposium format. This is in addition to their poster presentation at the 2003 CLAO Annual Meeting at CLES. This eclectic symposium covers contact lens solutions, GP contact lenses, optical wavefront analysis of contact lens corrected vision, contact lens compliance and lysozyme removal from high water contact lenses.

2:30pm - 4:45pm
The Future of Refractive Surgery Symposium including the Richard L. Lindstrom, MD, Lectureship by Raymond M. Stein
Fiesta 6
25-201A, 25-301B
David. M. Meisler, MD, Moderator
Level II, For: All eyecare professionals
Prerequisites: The participant should be familiar with the basic precepts of refractive surgery, in particular, laser refractive surgery.
Objectives: After attending this symposium the participant should be able to:
1. Compare and contrast microsurgical techniques to enhance refractive outcome of LASIK surgery;
2. Discuss wound healing modifiers in refractive surgery;
3. Understand the latest knowledge in the field of phakic IOls and lensectomy for refractive correction.
This symposium covers the latest topics in the field of refractive surgery. Phakic IOls and lensectomy for refractive corrections are covered. Wound healing modifiers, post-LASIK dry eye, and pupil size ramifications for refractive surgery all are discussed. This symposium includes the Richard L. Lindstrom, MD, Lecture. This special presentation covers innovative microsurgical techniques that may enhance the outcome of refractive surgery.

3:30pm - 3:35pm
The Richard Lindstrom, MD, Lectureship: Innovative Microsurgical Techniques to Enhance Refractive Outcomes
Ray Stein, MD
3:35pm - 3:50pm
The Future Role of Pupil Size in Refractive Surgery
Sam Omar, MD
3:50pm - 4:05pm
New Approaches to the Post-LASIK Dry Eye
Richard Eiferman, MD
4:05pm - 4:20pm
The Future of Lensectomy for Refractive Corrections
Mark Packer, MD
4:20pm - 4:45pm
Audience Q&A, Speaker Panel

5:00pm - 6:00pm
Pharmacology Symposium – Current Status of Fluoroquinolones
Coronado M, N
25-404
David Meisler, MD, Moderator
Level II, For: MD, OD, technician
Prerequisites: The participant should have a basic knowledge of ocular physiology.
Objectives: After attending this symposium the participant should be able to:
1. Understand the use of the various fluoroquinolones presently available;
2. Discuss the case for levofloxacin;
3. Identify future fluoroquinolones that may become available.
This symposium provides an update discussion on the current status of the group of ocular pharmaceuticals collectively known as the fluoroquinolones. New such pharmacological agents in this same group that are promising are also discussed.

5:00pm - 5:12pm
The Case for Ciprofloxacin
Richard Eiferman, MD
5:12pm - 5:24pm
The Case for Ofloxacin
Henry Perry, MD
5:24pm - 5:36pm
The Case for Levofloxacin
Charles Slonim, MD
5:36pm - 5:48pm
New Fluoroquinolones in the Pipeline
Francis Mah, MD
5:48pm - 6:00pm
Audience Q&A, Speaker Panel
The Contact Lens Society of America (CLSA) is a voluntary membership organization providing education on contact lens subjects for professionals in ophthalmology, optometry and opticianry. The organization accomplishes this through the education provided at its annual meeting, regional hands-on training at the Clinical Contact Lens Courses, and through home study programs. The CLSA publishes basic, intermediate and advanced level manuals and texts on contact lens fitting, as well as the Photo Atlas, a CD Rom compilation of contact lens images, including a test of your knowledge of the images.

The CLSA publishes EyeWitness, a quarterly magazine for members. The CLSA membership spans the globe with members in 20 countries.

Visit the CLSA Member Resources Booth #112/114 located in the exhibit hall for more information and to view its educational materials.

Headquarters Office
441 Carlisle Drive
Herndon, VA 20170
(703) 457-8100
(800) 296-9776
(703) 437-5100
Website: clsa.info

Tina M. Schott, Executive Director

Email: clsa@patriot.net

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CLS A Distinguished Members

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Herbert L. Ridgeway, Jr. 1955-57
Robert A. Danker 1957-59
H. Lyle Duerson, Jr. 1959-61
Joseph L. Bitonte 1962
Kenneth V. Swanson 1963
Joseph W. Soper 1964
Ralph T. Sutton 1965-67
Frank B. Sanning 1967-69
Louis S. Heyman 1969-71
Thomas J. Cogger 1971-73
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Jon H. Durkin 1975-77
Donald L. Klauer 1977-79
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